

**Florida Department of State**  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)205-0383

**From:**

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**LIMITED LIABILITY COMPANY**

**kivi timeshare leisure llc**

Certificate of Status	0
Certified Copy	1
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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

JB  
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ARTICLES OF ORGANIZATION

FOR

KIVI TIMESHARE LEISURE LLC

③

ARTICLE I. - NAME:

The name of this Limited Liability Company ("Company") shall be:

KIVI TIMESHARE LEISURE LLC

ARTICLE II. - ADDRESS

The mailing address and street address of the principal office of the Company is: c/o Michael Samuel, 3110 NE 2<sup>nd</sup> Avenue, Miami, Florida 33137.

ARTICLE III. - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to law.

ARTICLE IV. - MANAGEMENT

The Company is to be managed by its managers. The name and address of the initial managers of the Company is:

Michael Samuel  
3110 NE 2<sup>nd</sup> Avenue  
Miami, Florida 33137

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

\_\_\_\_\_  
Signature of a Member Representative

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA  
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE  
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA.


1. The name of the limited liability company is: KIVI TIMESHARE LEISURE LLC
2. The name and the Florida street address of the registered agent are:

MICHAEL SAMUEL  
NAME

3110 NE 2<sup>nd</sup> Avenue  
Florida street address (P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33137  
CITY, STATE AND ZIP

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
SIGNATURE

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TALLAHASSEE, FLORIDA

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