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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

tropical rb-jcm, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

J. BRYAN MAY 19 2004

FILED
2004 MAY 18 AM 11:01
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
04 MAY 18 AM 7:59
DIVISION OF CORPORATION

③

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
2004 MAY 18 AM 11:01
JULIUS ROBERTSON & ASSOCIATES
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Tropical RB-ICM, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

9240 Sunset Place Suite 100

Miami, Florida 33173

Mailing Address:

9240 Sunset Place Suite 100

Miami, Florida 33173

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Maria Fernandez-Vallé

Name


10570 N.W. 27th Street, Unit 103

Florida street address

Miami, Florida 33172

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 as provided for in Chapter 608, Florida Statutes.



Registered Agent's Signature

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(CONTINUED)

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager of Managing Member is as follows:

Title:

"MGR" = Manager

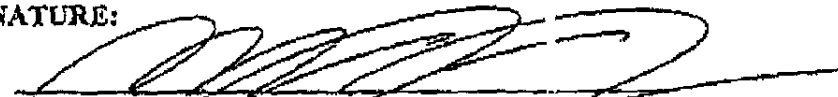
"MGRM" = Managing Member

Name and Address:MGR

Rolando Benitez
9240 Sunset Drive, Suite 100
Miami, Florida 33173

MGR

Jorge C. Mederos
9210 Sunset Drive, Suite 103,
Building 5
Miami, Florida

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE:**

 Signature of a member or an authorized representative of a member.

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

Maria Fernandez-Valle
 Typed or printed name of signer

Filing Fees:

\$100.00 Filing fee for Article of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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