

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)222-9428

LIMITED LIABILITY COMPANY

Arlington Tarragon, LLC

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

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CORRORATA FILIDO

Public ARSANS HAIR

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Mailing Address: Terragon South Development Corp.	_
	_
	_
200 East Las Olas Boulevard, Suite 1660	
Port Lauderdale, Florida 33301	_
. Non-Boule	5
ration System	
18	JUL 4
ine Island Road	01 NOF \$0
18	HA OINUL
	ed Office, & Registered Agent's Signature: registered agent are:

James A. Bordonaro Assistant Secretary

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

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.

C T Corporation System

Вy:

"MGR" = Manager

ARTICLE IV- Manager	(s) or Managing Member(s):
The name and address of	each Manager or Managing Member is as follows:
Title:	Name and Address:

MORM	Tarragon Realty Investors, Inc.
	1775 Broadway, 23rd Floor
	New York, NY 10019
-	
	
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Ise attachment if necessary)	

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

REQUIRED.

of 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.)

Marcy H. Kammermen, Esq., Assistant Secretary
Typed or printed name of signer

Filing Fees: \$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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