Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000126318 3)))

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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

conversion properties VII, Ilc

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

JIVISION OF CORPORATION

H04000126318

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
Conversion Properties VII, LLC	-
ARTICLE II - Address: The mailing address and street address of tis:	he principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
9141 S.W. 73 rd Street	9141 S.W. 73 ^M Street
Miami, Florida 33173	Miami, Florida 33173
ARTICLE III - Registered Agent, Regist The name and the Florida street address of	ered Office, & Registered Agent's Signature: the registered agent are:
Maria	Fernandez-Vallo Name
	7 4 CETTE

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 suppointment 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 cam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

- Andrews - Andr

Registered Agent's Signature

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SECRETARY OF STATE

H04000126318

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	GBM Homes, LLC 9141 S.W. 73rd Street Miami, Florida 33173
(Use attachment if necessary)	
NOTE: An additional article must be ad	ded if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member or as	n 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 of printed name of signee

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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