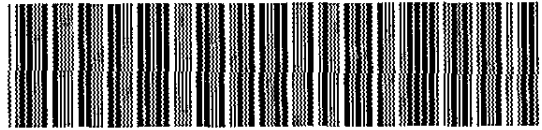


L040000 49342



600030263946

07/01/04--01014--013 \*\*155.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 JUL -1 PM 1:27

FILED

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

04 JUL -1 AM 11:28

RECEIVED

BK

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

**FILED**  
04 JUL - 1 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. 1200 AT THE PLAZA ON BRICKELL, L.L.C.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Pick up time 2:00
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
04 JUL -1 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I: Name**

The name of the Limited Liability Company is:

1200 at THE PLAZA ON BRICKELL, L.L.C.

**ARTICLE II: Address:**

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

10305 NW 41<sup>ST</sup> STREET, SUITE 116  
MIAMI, FL 33178

**ARTICLE III: Registered Agent, Office, and Agent's Signature:**

JOSE A. TORRES  
10305 NW 41<sup>ST</sup> STREET, SUITE 116  
MIAMI, FL 33178

*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 provided for in Chapter 608, F.S.*

  
Registered Agent's Signature

**PREPARED BY:  
JN ACCOUNTING AND TAX SERVICE, INC.  
10305 N.W. 41<sup>ST</sup> STREET, SUITE 116  
MIAMI, FL 33178**

**ARTICLE IV: Management**

The Company is to be managed by the managers, and the names and address of such managers who are to serve as managers are:

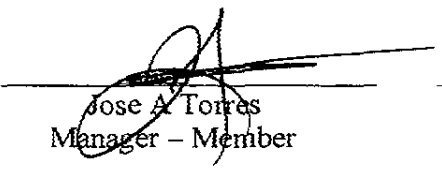
JOSE A TORRES, 10305 NW 41<sup>ST</sup> STREET, STE. 116, MIAMI, FL 33178

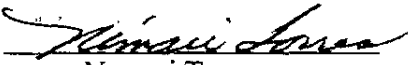
NEMARI TORRES, 10305 NW 41<sup>ST</sup> STREET, STE. 116, MIAMI, FL 33178

**ARTICLE V: Amendment of Article of Organization**

The company reserves the right to amend, alter, change, or repeal any provisions contained in these articles of organizations in the manner now or hereafter prescribed by statute and all rights conferred upon Members herein are granted subject to this reservation.

Date: June 30, 2004

  
\_\_\_\_\_  
Jose A. Torres  
Manager - Member

  
\_\_\_\_\_  
Nemari Torres  
Manager - Member