

104000049759

JUL 2 2 34 PM PROSKAUER ROSE LLP 241 745 T 5063#939908 #18 P.01

H04000138780

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

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.

((H04000138780 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : PROSKAUER ROSE LLP  
Account Number : 074673001063  
Phone : (561) 995-4751  
Fax Number : (561) 241-7145

FILED  
2009 JUL -2 A 9 04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
04 JUL -2 PM 4:08  
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

CG Valencia, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01-2
Estimated Charge	\$155.00

Name Availability	
Document Descriptor	
Electronic Filing Menu	
Corporate Filing	
Public Access Help	
W. P. Verifier	DCC

H04000138780

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: CG Valencia, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: c/o Stuart T. Kapp, Esq., Proskauer Rose LLP, 2255 Glades Road, Suite 340W, Boca Raton, Florida 33431

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

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

Stuart T. Kapp  
2255 Glades Road, Suite 340W  
Boca Raton, FL 33431

*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, F.S.*

  
Registered Agent's 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.)

Stuart T. Kapp, Esq.  
Typed or printed name of signer