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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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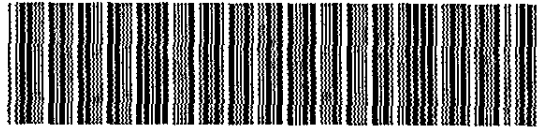
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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W04-57721
OK

HECTOR J. MIR, P.A.

ATTORNEY AT LAW

TELEFAX: (305) 444-4630

SUITE 1107, GABLES INTERNATIONAL PLAZA

TELEPHONE: (305) 444-0460

2655 LEJEUNE ROAD

CORAL GABLES, FLORIDA 33134

August 2, 2004

Registration Section
Division of Corporations
409 Gains Street
Tallahassee, Florida 32399

Re: LOFTS AT ATLANTIC, L.L.C.

Gentlemen:

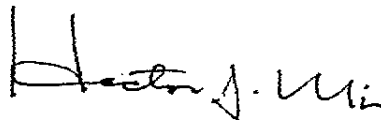
Enclosed please find two originals of Articles of Organization for LOFTS AT ATLANTIC, L.L.C. together with a check in the amount of \$155.00 in payment of the following:

Filing fee	\$ 100.00
Certified copy	30.00
Registered Agent	25.00
Designation	
	<u>\$ 155.00</u>

If the above documents are in order, I would appreciate that you file one original, certify the other, and send to the undersigned the certified original at the above address.

Thank you for your assistance. If you have any questions, please call me.

Sincerely,



Hector J. Mir

HJM/cm
Enclosure

FILED
AUG 3 2004
TALLAHASSEE, FLORIDA
CLERK OF COURT

ARTICLES OF ORGANIZATION

OF

LOFTS AT ATLANTIC, L.L.C.

The undersigned authorized representative of a member hereby files these Articles of Organization in order to organize a limited liability company under the laws of the State of Florida.

ARTICLE I

Name

The name of this limited liability company shall be
LOFTS AT ATLANTIC, L.L.C.

ARTICLE II

Purposes

This limited liability company is being formed for the purpose of engaging in any lawful business activity.

ARTICLE III

Principal Office

The address of the initial principal office of this limited liability company in the State of Florida shall be:

1666 Kennedy Causeway
Suite 706
North Bay Village, FL 33141

ARTICLE IV

Address of Registered Office and Registered Agent

The street address of the initial registered office of this limited liability company in the State of Florida shall be 2655 Le Jeune Road, Suite 1107, Coral Gables, FL 33134. The name of the initial registered agent of this limited liability company at the above address shall be Hector J. Mir. The members may from time to time change the registered office to any address in the State of Florida or change the registered agent.

Having been named as registered agent and to accept service of process for the above stated LLC 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 all 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.

Hector J. Mir
Registered Agent

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ARTICLE V
Management

This limited liability company shall be a manager-managed company. The name and address of the initial manager of this limited liability company are as follows:

Juan C. Gaviria
1666 Kennedy Causeway
Suite 706
North Bay Village, FL 33134

IN WITNESS WHEREOF, the undersigned, authorized representative of the initial member of this limited liability company, hereby subscribes these Articles of Organization this 15th day of July, 2004.


Hector J. Mir

FILED

2004-07-15

11:13