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## LIMITED LIABILITY COMPANY

## HS CARLISLE, LLC

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 10, 2004

CORPDIRECT AGENTS, INC.

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SUBJECT: HS CARLISLE, LLC REF: W04000030376

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filling cover sheet.

Only the last page of the document was received, you must refax the entire Articles of Organization.,

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Division of Corporations - P.O. BOX 6827 -Tallahassee, Florida 32314

Mark School Annie

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## ARTICLES OF ORGANIZATION

FOR.

HS CARLISLE, LLC

ARTICLE L - NAME:

The name of this Limited Liability Company ("Company") shall be:

HS CARLISLE, LLC

ARTICLE IL - ADDRESS

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

3225 Aviation Avenue

Suite 700

Coconut Grove, Florida 33133

(In accordance with section 508.408(3), Morida Statutes, the execution of this affidevit constitutes an affirmation under the ponalties of perjuty that the facts stated herein are true.)

Signature of a Member Representative

*P*24

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: HS CARLIELE, LLC
- 2. The name and the Florida street address of the registered agent are;

Stewart I. Marcus 3225 Aviation Avenue, Suite 700 Coconut Grove, Florida 33133

Having been named at 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.

PRINT NAME: STEWART L. MARCUS

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