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SECRETARY OF STATE

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PN 3: 08 04 AUG 26

Division of Corporations

Fax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634-3694

- Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

haven havana heights, l.l.c.

ALI

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00





ARTICLES OF ORGANIZATION 2004 AUG 25 P 1: 28 FOR FLORIDA LIMITED LIABILITY COMPACLAHASSEE. FLORIDA

	• • • • • • • • • • • • • • • • • • • •
ARTICLE I - Name: The name of the Limited Liability Company is:	
Haven Havana Heights L	.L.C.
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
16105 N.E. 18 M AVE.	- 5ame
No Miani Boh FL. 33102	
•	
ARTICLE III - Registered Agent, Registered Of The name and the Florida street address of the regis	stered agent are:
Victor K. e	nes
Plorida street address (P.O. Bo	
NO. mani Band City, State, and 2	1 _{FLORIDA} 33147
	a Francis of Complete and American Str. Complete Str.

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 provipled for in Chapter 608, Florida Statutes...

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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is;

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ARTICLE IV- Manager(s) or Mana	aging Member(s):
The name and address of each Manag	er or Managing Member is as follows: SECRETARY OF STATE TALLAHASSEE, FLORIDA
<u>Title:</u> "MGR" = Manager	TALLAHASSEE, FLURIUA
"MGRM" = Managing Member	
mg R	Harris Millman 1005 Nts. 18th Ave No. Many Ach TI 331102
MERM	HAWN SONEME DOVELONG (NE 1610-NEITAR N Migm, Bob FS 38162
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member of a	stillmortzed representative of a member.
(In accordance with section 6 of this document constitutes a that the facts stated herein are	198.408(3). Florida Statutes, the execution an affirmation under the penalties of perjury exerc.) 199000 Economic Receipt 16 = printed name of signee

Filing Fers:
\$190.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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