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TRANSMITTAL LETTER

FILED

TO: Registration Section Division of Corporations

2004 AUG 26 P 1:56

SUBJECT: LEVITT AND SONS OF LAKE COUNTY, LLC

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	JEFFERY HOYOS
· · · · · · · · · · · · · · · · · · ·	(Name of Person)
	C/O LEVITT AND SONS, LLC
	(Firm/Company)
<u> </u>	7777 GLADES ROAD, SUITE 410
	(Address)
	BOCA RATON, FL 33434
• •	(City/State and Zip Code)
For further information concerning	this matter, please call:
CHRIS VASSOV	at (561) 482 5100 EXT 205
(Name of Person)	(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassec, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR

FILED

FLORIDA LIMITED LIABILITY COMPANYON AUG 26 P 1: 56

ARTICLE I - Na The name of the I	nme: Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
LEVITT AND SON	s of lake county, llc	<u> </u>	
ARTICLE II - A The mailing addre		pal office of the Limited Liability Company is:	
Principal Office	Address:	Mailing Address:	
7777 GLADES ROAD, SUITE 410		7777 GLADES ROAD, SUITE 410	
BOCA RATON, FL	33434	BOCA RATON, FL 33434	
	Registered Agent, Registered Off Florida street address of the regis	fice, & Registered Agent's Signature: tered agent are:	
	JEFFERY HOYOS	<u> </u>	
and the second	Name		
	7777 GLADES ROAD, SUITE 41 Florida street address (P.O. Bo		

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, Florida Statutes..

By:

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

FILED

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows AUG 26 P 1: 56

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF TALLAHASSEE, F	STATE LORIDA
MGRM	LEVITT AND SONS, LLC		
	7777 GLADES ROAD, SUITE	410	•
	BOCA RATON, FL 33434		
			•
	- Transport		
			•
3 - 4 C 120 - 128 - 128 - 128 - 129			,,,,
(Use attachment if necessary) NOTE: An additional article must be	added if an effective date is	requested.	
REQUIRED SIGNATURE:			
(In accordance with section 608.4	therized representative of a mem 108(3), Florida Statutes, the executi firmation under the penalties of per	on	
that the facts stated herein are tru			

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee