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Division of Corporations

FAX NO.

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Florida Department of State
Division of Corporations
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MJH

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DIVISION OF CORPORATION

To:

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

From:

Account Name : BROAD AND CASSEL (ORLANDO)
Account Number : I19980000090
Phone : (407) 839-4200
Fax Number : (407) 839-4264

LIMITED LIABILITY COMPANY

605 San Sebastian, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

STATE
TALLAHASSEE FLORIDA

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Corporate Filing

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Florida Dept of State
Fax Audit No. H04000179577.3

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 605 San Sebastian, LLC
(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:

Luis G. Reyes
(Name of Person)

605 San Sebastian, LLC
(Firm/Company)

8751 Beller Drive
(Address)

Orlando, FL 32817
(City/State and Zip Code)

For further information concerning this matter, please call:

Luis G. Reyes at (407) 970-7055
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 B. Gaines Street
Tallahassee, Florida 32399

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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

605 San Sebastian, LLC**ARTICLE II - Address:**

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

Principal Office Address:**Mailing Address:**8751 Beller Drive8751 Beller DriveOrlando, FL 32817Orlando, FL 32817**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Luis G. Reyes

Name

8751 Beller DriveFlorida street address (P.O. Box **NOT** acceptable)OrlandoFLORIDA 32817

City, State, and Zip

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TALLAHASSEE FLORIDA
SECRETARY OF STATE

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..



Registered Agent's Signature

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

The name and address of each Manager or Managing Member is as follows:

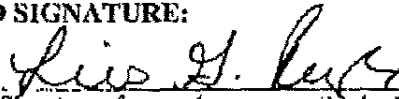
Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMLuis G. Reyes8751 Belter DriveOrlando, Florida 32817

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED 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.)

Luis G. Reyes

Typed or printed name of signee

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)