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OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 200 Certified Copy. Mail out Will wait Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership

Reinstatement

Examiner's Initials

Trademark

Other

PDE031(0/03)

Name Reservation

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
D'LEVANT RANCH LLC		
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
DAHOMEY TALLAVERA	6402 SW 185TH WAY SW RANCHES, FL 3333	
ARTICLE III - Registered Agent, Reg The name and the Florida street address	gistered Office, & Registered Agent's Signature: of the registered agent are:	

DAHOMI TALLAVERA Name 6302 SW 185TH WAY_ Florida street address (P.O. Box NOT acceptable)

SOUTHWEST RANCHES FLORIDA 33332 City, State, and Zip

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...

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
	'-	
MGR	DAHOMEY TALLAVERA	
	6402 SW 185TH WAY SOUTHWEST RANCHES, FL 33332	
•		
-		
(Use attachment if necessary)		
NOTE: An additional article mus-	t be added if an effective date is requested.	
REQUIRED SIGNATURE	\wedge	
1 Willio	ment.	
	an authorized representative of a member.	
(In accordance with section of this document constitutes that the facts stated herein a	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.)	
DAHOMI TALLA		
Typed	or printed name of signee	