0400085060 Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H040002336263)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another covery sheet

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

first kendall lake towers llc

0
1
03
\$155.00

J. BRYAN NOV 2:4 2004

Macking Hillog Manu.

Cornorate Filing

Public Access Hale

3

H0400033424

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

FIRST KENDALL LAKE TOWERS LLC

ARTICLE I

The name of the Limited Liability Company shall: FIRST KENDALL LAKE TOWERS LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company is: 8700 W. FLAGLER, SUITE #165, MIAMI, FL 33174.

ARTICLE IV

The name and the Florida street address of the registered agent are: JULIO LAGO, 8700 W. FLAGLER, SUITE #160, MIAMI, FL 33174.

ARTICLE V

The name of the Managers of this Company shall be:

MANAGER JULIO LAGO

H04000233626

H04000233624

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

First Kendal I LAKE Towers LLC (Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization. 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.

Registered Agent

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.)

Typed or printed name of signee

HO4000233626