Florida Department of State
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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : NATIONAL CORPORATE RESEARCH, LTD.
Account Number : I20000000088
Phone : (800)221-0102
Fax Number : (212)564-6083

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04 NOV 29 AM 8:15
DIVISION OF CORPORATION

TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

Hobe Properties LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$155.00

Electronic Filing Menu Corporate Filing Public Access Help

L04-86043
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is: Hobe Properties 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:**
c/o Wilomar Corporation	c/o Wilomar Corporation
900 South US Highway One, Ste. 205	900 South US Highway One, Ste. 205
Jupiter, FL 33477	Jupiter, FL 33477

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

National Corporate Research, Ltd., Inc.
Name

103 N. Meridian Street
Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301
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, F.S.

Ann Marie Cummins ANN MARIE CUMMINS, ASST. SEC'Y
Registered Agent's Signature Print Name (& Title, if applicable)

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(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	
MGRM	Overlook Vineyards Corp. 900 South US Highway One, Suite 205 Jupiter, FL 33477 c/o Wilomar Corporation

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Overlook Vineyards Corp.

By Damaris D.W. Ethridge

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.)

Damaris D.W. Ethridge

Typed or printed name of signee

Filing Fees:
$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)