

W05000004413

Florida Department of State

Division of Corporations

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DIVISION OF CORPORATION

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

STATE OF FLORIDA
TALLAHASSEE

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LIMITED LIABILITY COMPANY

south of 5th properties, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

South of 5th 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:

20801 Biscayne Blvd.
Suite 307
Aventura, FL 33180-1423

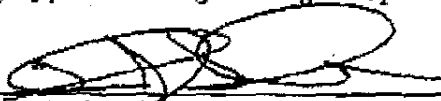
20801 Biscayne Blvd.
Suite 307
Aventura, FL 33180-1423

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

HILL SCHUMER LLP
KARL J. SCHUMER, ESQUIRE
20801 Biscayne Boulevard
Aventura Corporate Center, Suite 307
Aventura, Florida 33180

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, P.S.


Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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HILL SCHUMER LLP
KARL J. SCHUMER, ESQUIRE
20801 BISCAYNE BLVD
SUITE 307
AVENTURA, FL 33180

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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

MGRM

Name and Address:

Danny LAZANO
20801 Biscayne Blvd. #307
Aventura, FL 33180-423

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

 DANNY LAZANO
FRONT

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.)

KARL J. SCHUMER

Typed or printed name of signer

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)

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