

Division of Corporations Public Access System

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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

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

LIMITED LIABILITY COMPANY

carlos ocean view I, llc

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

SECRETARY OF : TALLAHASSEE, FI

CARLOS OCEAN VIEW I, LLC

ARTICLE I

The name of the Limited Liability Company shall: CARLOS OCEAN VIEW I, 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: 3600 MYSTIC POINTE DRIVE # 712, AVENTURA, FL 33180

ARTICLE IV

The name and the Florida street address of the registered agent are: KARINA KLEE, 3600 MYSTIC POINTE DRIVE #712, AVENTURA, FL 33180

ARTICLE V

The name of the Manager(s) for this company shall be:

KARINA KLEE (MANAGER)

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

2005 FEB 14 A 9: 5.

(Name of Company)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 perjuty that the facts stated herein are true.)

Typed or printed name of signee

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