

L05000018117

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

solaris 2302, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

J. BRYAN FEB 22 2005

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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H05000044812

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY OF**

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CLERK OF CIRCUIT COURT
MIAMI, FLORIDA

SOLARIS 2302, LLC

ARTICLE I

The name of the Limited Liability Company shall: SOLARIS 2302, 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: 10556 N.W. 26 STREET, SUITE D-101, DORAL, FL 33172

ARTICLE IV

The name and the Florida street address of the registered agent are: JOSEPH F. CABANAS, CABANAS & ASSOCIATES, P.A., 10520 N.W. 26 STREET, SUITE C-201, MIAMI, FL 33172

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

ARTICLE V

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

MAURO SCATTOLINI 10556 N.W. 26 STREET
SUITE D-101
DORAL, FL 33172

CONSTANZA LINA-SCATTOLINI 10556 N.W. 26 STREET
SUITE D-101
DORAL, FL 33172

ELDA SCATTOLINI 10556 N.W. 26 STREET
SUITE D-101
DORAL, FL 33172

JAIME FLORES 10556 N.W. 26 STREET
SUITE D-101
DORAL, FL 33172

TERESA DAMIANO DE PROFETA 10556 N.W. 26 STREET
SUITE D-101
DORAL, FL 33172

ARTICLE VI

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

LIJAI L.L.C.

LAS CUÑIS, LLC

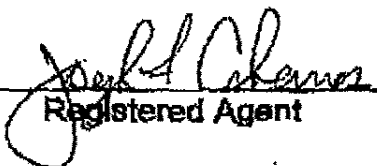
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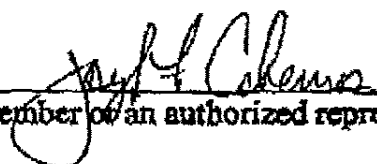
**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

SOLARIS 2302, LLC
(Name of Company)

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JULIA G. CORPORATIONS
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 perjury that the facts stated herein are true.)

JOSEPH F. CABANAS
Typed or printed name of signee

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