

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.  
Account Number : 076624003440  
Phone : (305) 444-6226  
Fax Number : (305) 442-4829

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DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY****CRAWFORD RESIDENCES II LLC.**

Certificate of Status	1
Certified Copy	0
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SECRET  
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION  
OF  
CRAWFORD RESIDENCES II LLC.

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I  
NAME

The name of this Limited Liability Company is: CRAWFORD RESIDENCES II LLC.

ARTICLE II  
GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III  
TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy, dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV  
ADDRESS

The principal office and mailing address of this Limited Liability Company in the State of Florida is 2330 PONCE DE LEON BLVD., SUITE 203, CORAL GABLES, FL 33134. The Board of Managers may from time to time move the principal office to another address in Florida.

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ARTICLE V  
REGISTERED OFFICE, REGISTERED AGENT

That CRAWFORD RESIDENCES II LLC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates GUILLERMO CEDENO, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2330 PONCE DE LEON BLVD., SUITE 203, CORAL GABLES, FL 33134.

ARTICLE VI  
MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The Initial Manager shall be CARONDELET LLC., of 2330 PONCE DE LEON BLVD., SUITE 203, CORAL GABLES, FL 33134.

WITNESS the hand and seal of the Manager in Miami-Dade County, State of Florida, this 29<sup>th</sup> day of March, 2005

The Manager

CARONDELET LLC.

By:

Guillermo Cedeno, Member

STATE OF FLORIDA )  
COUNTY OF MIAMI-DADE )

SS:

PERSONALLY appeared before me, GUILLERMO CEDENO, the Manager of CARONDELET LLC., the Manager of CRAWFORD RESIDENCES II LLC., for and on behalf of the entity, who produced \_\_\_\_\_ as identification, or is personally known to me, who being by me first duly sworn, acknowledge that she signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Florida this 29<sup>th</sup> day of March, 2005

NOTARY PUBLIC, STATE OF FLORIDA  
AT LARGE

My commission expires:



Adelaida Fernandez-Fraga  
Commission #DD280333  
Expires: Feb 26, 2008  
Bonded thru  
Atlantic Bonding Co., Inc.

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF  
PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE  
SERVED.**

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That CRAWFORD RESIDENCES II LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, designates GUILLERMO CEDENO as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2330 PONCE DE LEON BLVD., SUITE 203, CORAL GABLES, FL 33134.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

The Registered Agent

  
GUILLERMO CEDENO

Date: March 29, 2005

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