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TRANSMITTAL LETTER

TO: Registration Se Division of Cor			
SUBJECT: QUALITY	FIRST HOMES XIV, LLC (Name of Limited	1 Liability Company)	
The enclosed Articles of	f Organization and fee(s) are st	abmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Amy J. G	Salloway, Esq.	Name of Person)	±
	(r	vame of Person)	*
Duke, Mullin & Gallo	owav, P. A.		2005 A
		Firm/Company)	APR 27 PM 1:01
1700 East L	.as Olas Blvd., PH-1		SSEE DED
		(Address)	一 2号 :
		(* ***********************************	82 0
			55
Fort l	auderdale, FL 33301		, Co
	(City/	State and Zip Code)	
For further information	concerning this matter, please	cail:	
Amy J. Galloway		at (954) 761-7200	
(Name	of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$190.00 Filing Fee, Certificate of Status & 2 Certified Copies (additional copies enclosed)
STREET ADDRESS: Registration Section Division of Corporations		MAILING A Registration Division of C	Section Corporations

409 E. Gaines Street Tallahassee, Florida 32399

P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	MIS APR 2
QUALITY FIRST HOMES XIV, LLC	SSEE CORP
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1785 NE 162 Street	1785 NE 162 Street
Miami, FL 33162	Miami, FL 33162
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the	· · · · · · · · · · · · · · · · · · ·
Bennett Gamel	and the second s
Name	
1785 NE 162 Street	
Florida street ad	dress (P.O. Box NOT acceptable)
Miami, FL 33162	FL
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.

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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	Name and Address:
MGRM	Bennett Gamel
	1785 NE 162 Street
	Miami, FL 33162
MGR	Miami, FL 33162 Wayne Masur 2680 Hunter Court
**************************************	2680 Hunter Court
	Fort Lauderdale, FL 33331
	深夏 主
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	A.
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	

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.)

ETT GAMEC

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)