

Division of Corporations Public Access System

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MJH

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : CAMNER, LIPSITZ AND POLLER, PROFESSIONAL ASSOCIATION

Account Number : 075410001634 : (305)442-4994 Phone Fax Number : (305)442-2389

LIMITED LIABILITY COMPANY

VANTAGE SOUTHCHASE, LLC

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Audit No. H0500011300203

ARTICLES OF ORGANIZATION OF VANTAGE SOUTHCHASE, LLC

The undersigned hereby forms a limited liability company under the Florida Limited Liability Company Act and adopt as the Articles of Organization of such limited liability company the following:

1. The name of the limited liability company:

VANTAGE SOUTHCHASE, LLC (the "Company")

H. The period of its duration:

Perpetual effective from the date of filing of these Articles of Organization with the Secretary of State of the State of Florida.

III. The purpose for which the limited liability company is organized:

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

IV. A. The mailing address of the principal place of business in Florida:

1701 Ponce de Leon Boulevard, Suite 200 Coral Gables, FL 33134

B. The name and address of the Company's initial Registered Agent is:

Neale J. Poller 550 Biltmore Way - Suite 700 Coral Gables, Florida 33134

V. The total amount of cash contributed is:

\$ 500.00

Additional contributions shall be made at such times and in such amounts as may be unanimously agreed by the Members as provided in the Operating Agreement of the Company.

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The undersigned, a member of the Company, for the purpose of forming a liability company to do business within the State of Florida, does make and file these Articles of Organization, hereby declaring and certifying that the facts stated above are true and correct.

Claudia Garcia

The undersigned hereby accepts the foregoing designation as initial Registered Agent, is familiar with, accepts and agrees to comply with the provision of law applicable to such designation.

Neale J. Poller

STATE OF FLORIDA COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this ______ day of _______, 2005 by Neale J. Poller. He is personally known to me or has produced _______N/A ______ as identification.

My Commission Expires:

MARREE L DAVIS
MY COMMISSION # DO 286836
EXPIRES: March 9, 2008
Bonded Thrs Budget Kotary Services

Notary Public

Print Name: MARILE L. DAULS
Commission No.

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