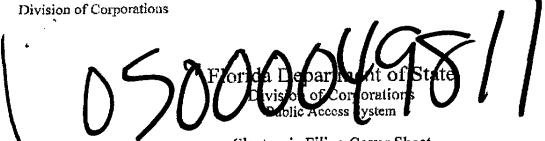
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Division of Corporations

Fax Number : (850)205-0383

From:

Account Number : I19990000180

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

: (305)357-5775

Fax Number

: (305)357-5534

LIMITED LIABILITY COMPANY

VALENCIA TOWERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VALENCIA TOWERS, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

c/o Michael Rosenbaum, Esq. 201 Alhambra Circle, Suite 601 Coral Gables, FL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Michael Rosenbaum

201 Alhambra Circle, Suite 601 Florida street address (P.O. Box NOT acceptable)

Coral Gables, FL 33134
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 striptes relating to the proper and complete performance of my diffes, and Lam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article-must be added if an effective date is requested)

Signature of a phomeer or on 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 here in are true.)

Michael Rosenbaum, Authorized Representative Typed or printed name of signee

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