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Florida Department of State

Division of Corporations

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DIVISION OF CORPORATION

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305) 634-3694

Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

oasis at antilla, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION

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TALLAHASSEE, FLORIDA

ARTICLE I- Name:

The name of the Limited Liability Company is:

OASIS AT ANTILLA, LLC

ARTICLE II- Address:

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

1401 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FLORIDA 33134

ARTICLE III- Management:

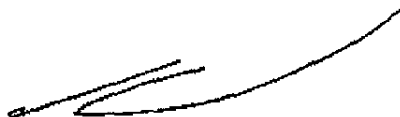
The Limited Liability Company is a manager-managed company.

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

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

LAW OFFICES OF CARRILLO & CARRILLO, P.A.
1401 PONCE DE LEON BLVD.
CORAL GABLES, FLORIDA 33134

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.



LAW OFFICES OF CARRILLO & CARRILLO, P.A.
Registered Agent's Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V- Duration

The period of duration for the Limited Liability Company shall begin on the date of filing these Articles of Organization within the Florida Secretary of State, and shall have perpetual existence and duration until terminated in accordance with applicable law.



Pedro R. Carrillo, Esquire
Signature of an authorized representative

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