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SECRETARY OF STATE

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FLORIDA DEPÁRIMENT OF STATE

Glenda E. Hood Secretary of State

May 2, 2005

MARCELS E NADES 11991 S.W. 93 TERHACE MIAMI, FL 33186

SUBJECT: CAMELOT: HOME-INVESTMENTS, LLC.

Ref. Number: W05000022161

We have received your document for CAMELOT- HOME-INVESTMENTS, LLC. and your check(s) totaling \$75.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suitor that will clearly indicate that it is a corporation. Such suitage include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filling will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Document Specialist New Filings Section

Letter Number, 605A00031021

May some as in a

August 5, 2005

Ms. Suzanne Hawkes Document Specialist New Filings Section

Ref: Camelot Home Investments, L.L.C. REF. # W05000022161

Dear Mrs. Hawkes.

Thank you very much,

Hoping all is well. Enclosed please find check #2877 for the amount of \$81.25. This amount should cover the difference already paid in the amount of \$78.75 to complete the amount of \$ 160.00 due. In error, I filled out the wrong documents and filled for a Corporation instead of a L.L.C.

Thank you for offering your help in completing this paper work for the L.L.C. and for taking these documents downstairs.

If you have any questions, please feel free to call me at (786) 251-9836.

Amparo (Ampy) Nader
Realtor

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CAMELOT DYNAMIC ORCOT
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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | | |
|--|--|--|
| SUBJECT: Come of Limited Liability Company) | | |
| The enclosed Articles of Organization and fee(s) are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Marcelo E. Nadar (Name of Person) | | |
| C. H. I. L.L.C | | |
| 11001 5:W. 93. Terrice | | |
| Miani - FL 33/76 (City/State and Zip Code) ALEGRANIE (City/State and Zip Code) | | |
| Star I | | |
| For further information concerning this matter, please call: Marcelo Nader 305 596-3941 95 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount: | | |
| □ \$125.00 Filing Fee & □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | | |
| | | |

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Comp | oany is: | |
|---|--|-----------------|
| Camelot Hou | re Investments, (| _L.C. |
| ARTICLE II - Address: The mailing address and street address of | of the principal office of the Limited Liabilit | ty Company is: |
| Principal Office Address: | Mailing Address: | |
| 11991 S.W. 93 Tecc | En mar mar e mar se | |
| | The state of the s | · |
| ARTICLE III - Registered Agent, Reg | gistered Office, & Registered Agent's Sign | nature: |
| The name and the Florida street address | of the registered agent are: | |
| Marcel | o Norda | 05 AUG SECRE |
| 11991 | S.W. 93 Tempe | - SSE - 15 |
| Florida: | street address (P.O. Box <u>NOT</u> acceptable) FL 33/86 | FLOR F. ST. |
| City | y, 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..

egistered Agent's Signature

(CONTINUED)

| · The name and address of each Mar | nager or Managing Member is as follows: |
|--|--|
| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
| "M6K" | Marcelo Nada |
| M6KM" | Angaro Nader |
| では、 では、 では、 では、 では、 では、 では、 では、 | Mari - FL 33/76 |
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| (Use attachment if necessary) | ALLE ALL STATES AND ST |
| NOTE: An additional article mure REQUIRED SIGNATURE: | ust be added if an effective date is requested. SSEF FLORIDA |
| (In accordance with of this document co | nber or an authorized representative of a member. a section 608.408(3), Florida Statmes, the execution sustitutes an affirmation under the penalties of perjury ed herein are true.) |
| | Typed or printed name of signee |

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV- Manager(s) or Managing Member(s):

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)