

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000199028 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: BROAD AND CASSEL (BOCA RATON)

Account Number: 076376001555 Phone

: (561) 483-7000

Fax Number

: (561)218~8960

LIMITED LIABILITY COMPANY

Articles of Organization of Carmelken, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Marth

Comprain Flips:

Bulello Access balls



Broad and Cassel->

7777 GLADES ROAD SUTTE 300 BOCA RATON, FLORIDA 33434 TELEPHONE, 561,483,7000 FACSIMILE: 561.483.7321 www.broadandcassel.com

TELECOPIER TRANSMITTAL

DATE:

Thursday, August 18, 2005 5:06:26 PM

To:

Department of State

ADDRESS:

TELECOPIER PHONE NO.:

1-850-205-0383

CONFIRMATION PHONE NO.:

FROM:

Tracey Testa

TOTAL NUMBER OF PAGES:

04 (including cover)

CLIENT AND MATTER:

09999-0999

MESSAGE:



PLEASE NOTIFY US IMMEDIATELY IF ALL PAGES WERE NOT RECEIVED AT 561.483.7000

FAX OPERATOR: FIRST ATTEMPT: SECOND ATTEMPT:

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS ATTORNEY-CLIENT PRIVILEGED AND CONFIDENTIAL. IT IS INTENDED FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

BOCA RATON FT. LAUDERDALE MIAMI ORLANDO TALLAHASSEE TAMPA West Palm Beach Fax Audit Number: H05000199028 3

ARTICLES OF ORGANIZATION

OF

CARMELKEN, LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLEI

The name of this limited liability company shall be: Carmelken, LLC.

ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be 3250 Mary Street, Suite 500, Coconut Grove, Florida 33133, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 3250 Mary Street, Suite 500, Coconut Grove, Florida 33133. The initial registered agent at that address is Matthew Rieger, P.A.

ARTICLE IV

This limited liability company will be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articless of Organization this 18 day of August, 2005.

| Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 18 day of August, 2005. | Companization this 2005.

Fax Audit Number: 1

H05000199028 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 508.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST -- The name of the limited liability company is Carmelken, LLC.

SECOND - The name and address of the registered agent and office is:

Matthew Rieger, P.A.
3250 Mary Street
Suite 500
Cocorut Grove, Florida 33133

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.

Dated this 18 day of August, 2005.

Matthew Rieser, PA) President

172419

H05000199028 3

Fax Audit Number: