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M. HODGES

Division of Corporations

: (850)205-0383 Fax Number

From:

: GILLIGAN, KING & GOODING, P.A. Account Name

Account Number : I20010000016 Phone : (352)867-7707 Fax Number : (352)867-0237

LIMITED LIABILITY COMPANY

Blue Raven, LLC

Certificate of Status	0
Certified Copy	0
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Sent By: Gilligan, King, Gooding;

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Blue Raven, LLC

ARTICLE II - Address

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

5900 LaGorce Drive Miami Beach, FL 33140

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

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

Name:

Anne Batchelor-Robjohns

Florida street address:

5900 LaGorce Drive

City, State, and Zip

Miami Beach, FL 33140

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.

Article IV - Management (Check box if applicable.)

X 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 member or sh 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 herein are true.)

Anne Batchelor-Robjohns Typed or printed name of signee

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