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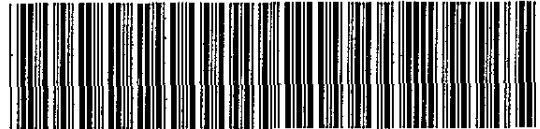
(Business Entity Name)

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TALLAHASSEE, FLORIDA

J. Shivers OCT 03 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5711 Pine Tree Drive LLC
(Name 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:

John MITCHELL
(Name of Person)

Right Properties Inc
(Firm Company)

4403 Pine Tree Drive, Miami Beach, FL 33140
(Address)

(City State and Zip Code)

For further information concerning this matter, please call:

John Mitchell at (305) 677 3874
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY**

Article I --Name:

The name of the Limited Liability Company is:
5711 Pine tree Drive LLC

Article II- Address:

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

4403 Pine tree Drive, Miami beach, Fl 33140

Article III-Registered Agent, registered Office and Registered Agent's Signature:

The name and the Florida Street Address of the Registered Agent are:

Nicholas STUDDS
4403 Pine tree Drive
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 propewr and complete performance of my duties, I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. F.S.



Nicholas STUDDS

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Article IV-Managers

The name and address of each manager is as follows:

Manager: Maria MICHAELS
4403 Pine tree Drive
Miami Beach, Fl. 33140

Manager: Nicholas STUDDS
4403 Pine tree Drive
Miami Beach, Fl. 33140



Nicholas STUDDS

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an Affirmation under the penalty of perjury that the facts stated herein are true)

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