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September 30, 2005

Department of State Division of Corporations Corporate Filings P O Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed is a check for \$155 to cover the formation of GROVE HOMES LLC

Please send the certified copy to: SILVIO VAZQUEZ, 299 ALHAMBRA CIRCLE SUITE 521, CORAL GABLES, FL 33134. TELEPHONE NUMBER 305-447-9441.

Thank you for your cooperation.

Very truly yours,

ARTICLES OF ORGANIZATION OF GROVE HOMES LLC

Article I Name

The name of the limited liability company shall be GROVE HOMES LLC.

Article II Principal Office

The principal place of business and mailing address of this Limited Liability Company shall be: 299 ALHAMBRA CIRCLE SUITE 521 CORAL GABLES, FLORIDA 33134

Article III Initial Registered Agent & Street Address

The name and address of the initial registered agent is: SILVIO VAZQUEZ located at 299 ALHAMBRA CIRCLE SUITE 521 CORAL GABLES FLORIDA 33134

Article IV Duration

The duration of this Limited Liability Company shall be 12/31/2044

Article V Managers/Members

The management of this Limited Liability Company is reserved for the members and the name and address of members is:

SILVIO VAZQUEZ 299 ALHAMBRA CIRCLE SUITE 521 CORAL GABLES, FL 33134

CARLOS HIMMELSTERN 1672 PRESIDENTIAL WAY NORTH MIAMI BEACH, FL 33179 DE OCT -6 ANII: 18

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/ REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: GROVE HOMES LLC.

The name and address of the registered agent and office is SILVIO VAZQUEZ, 299 ALHAMBRA CIRCLE, SUITE 521, CORAL GABLES, FL 33134.

Having been named as registered agent and to accept service for the above stated 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.

Signature

SILVIO VAZOUEZ

September 28, 2005