

Division of Corporations

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W05000106987Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.
Account Number : 076624003440
Phone : (305)444-6226
Fax Number : (305)442-4829**W05-106987**

LIMITED LIABILITY COMPANY

GATEWAY ESTATES, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	03
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ARTICLES OF ORGANIZATION

OF

GATEWAY ESTATES, LLC.

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I
NAME

The name of this Limited Liability Company is: GATEWAY ESTATES, LLC.

ARTICLE II
GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III
TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV
ADDRESS

The principal office and mailing address of this Limited Liability Company in the State of Florida is 8277 SW 110 TERRACE, MIAMI, FL 33156. The Board of Managers may from time to time move the principal office to another address in Florida.

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ARTICLE V
REGISTERED OFFICE, REGISTERED AGENT

That GATEWAY ESTATES, LLC., desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ANTONIA SICILIA, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 8277 SW 110 TERRACE, MIAMI, FL 33156.

ARTICLE VI
MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The Initial Manager shall be ANTONIA SICILIA of 8277 SW 110 TERRACE, MIAMI, FL 33156.

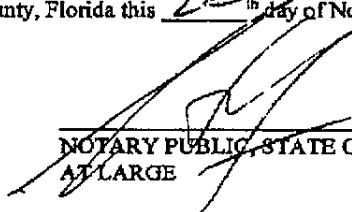
WITNESS the hand and seal of the manager in Miami-Dade County, State of Florida, this 2ND day of November, 2005.


ANTONIA SICILIA
Manager

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, ANTONIA SICILIA, as Manager of GATEWAY ESTATES, LLC, for and on behalf of the entity, who produced FL. D.C. as identification, or is personally known to me, who being by me first duly sworn, acknowledge that she signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Florida this 2ND day of November, 2005.


NOTARY PUBLIC, STATE OF FLORIDA
AT-LARGE

My commission expires:



CARLOS F. ARAZOZA
MY COMMISSION # DD 381420
EXPIRES: July 17, 2008
Bonded Thru Budget Notary Services

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF
PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That GATEWAY ESTATES, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, designates ANTONIA SICILIA, as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 8277 SW 110 TERRACE, MIAMI, FL 33156.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

REGISTERED AGENT


ANTONIA SICILIA

Date: November 2nd, 2005

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