

L05000116227

Florida Department of State  
Division of Corporations  
Public Access System

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.

((H05000278452 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

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

FILED  
2005 DEC -5 AM 10:28  
TALLAHASSEE, FLORIDA

RECEIVED  
05 DEC -5 PM 3:47  
DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY**

**gables corinthian plaza, llc**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

J. BRYAN DEC 6 2005

2

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  
GABLES CORINTHIAN PLAZA, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **Gables Corinthian Plaza, LLC**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: **837 Lorpa Street, Coral Gables, Florida 331340**

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

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

Arvesu & Associates, PLLC  
Name  
201 Alhambra Circle, Suite 502  
Florida street address (P.O. Box NOT acceptable)  
Coral Gables, Florida 33034  
City, State, and Zip

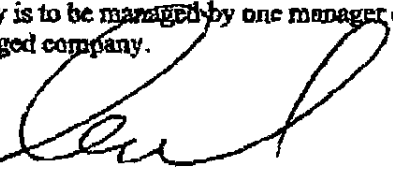

FILED  
2005 DEC -5 AM 10:28  
ALLAHABAD, FLORIDA

*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.)**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Waldo Toyos, III, Member

  
\_\_\_\_\_  
Registered Agent's Signature  
  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes and affirmation under the penalties of perjury that the facts stated herein are true.)

Waldo Toyos, III  
Typed or printed name of signer

HD5000278452