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EMPIRE

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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

12/12 re-filing

LIMITED LIABILITY COMPANY

Lifestyle Mortgage Brokerage, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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December 8, 2005

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: LIFESTYLE MORTGAGE BROKERAGE, LLC
REF: W05000054232

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Leslie Sellers
Document Specialist

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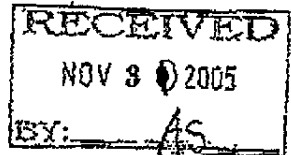
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③
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lifestyle Mortgage Brokerage, LLC
(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviations "LLC," or "L.C.")



ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

400 ARTHUR GODFREY ROAD
SUITE 200
MIAMI BEACH, FL 33140 SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
 (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

DAVID M. GOLDSTEIN, PA

Name

1441 BRICKELL AVENUE, SUITE 1003Florida street address (P.O. Box NOT acceptable)MIAMI, FL 33131

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company on 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 609, F.S.


 Registered Agent's Signature (REQUIRED)

David M. Goldstein, PA

(CONTINUED)
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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

H05000279871

Title:**Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

PHILIP WOLMAN, MGR400 ARTHUR GODFREY RDSUITE 200MIAMI BEACH, 33140ERIC SHEPPARD, MGRSAMEELI SHOUELA, MGRMSAME

(Use attachment if necessary)

ARTICLE V- Effective date, if other than the date of filing: DECEMBER 1, 2005 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED 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 document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DAVID M. GOLDSSTEIN, PA

Typed or printed name of signer

Filing Fees:

\$225.00 Filing Fee for Articles of Organization and Declaration of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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