

Division of Corporations

104 000000 954

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.

(((H06000002391 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 : FIELDSTONE LESTER SHEAR & DENBERG
Account Number : I19990000180
Phone : (305) 357-5775
Fax Number : (305) 357-5534

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 JAN -4 AM 9:00

FILED

RECEIVED
06 JAN -4 PM 3:46
DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Bray & Gillespie XXXIV, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 01 |
| Estimated Charge | \$155.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

104-954
ar

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
BRAY & GILLESPIE XXXIV, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
800 Brickell Avenue, Ste. 1270
Miami, Florida 33131

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

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

MICHAEL A. ROSEN
Name

800 Brickell Avenue, Suite 1270
Florida street address (P.O. Box NOT acceptable)

Miami, FL 33131
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 JAN -4 AM 9:00

FILED

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

[Signature]
Registered Agent's Signature

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.

(An additional article must be added if an effective date is requested)

[Signature]
Signature of a member or an authorized representative of a member.

(In accordance with section 608.405(3), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL A. ROSEN, Authorized Representative
Typed or printed name of signer