

JAN-04-0 11:41AM

Division of Corporations

AKERMAN SENTERFITT & EIDSON

+3053745095

T-48

01/02

977

**LD60000001350**

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.

((H06000001823 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:

*AKERMAN, SENTERFITT & EIDSON, P.A.*  
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.  
Account Number : 075471001363  
Phone : (305) 374-5600  
Fax Number : (305) 374-5095

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JAN -4 AM 11:14

APPROVED  
AND  
FILED

RECEIVED

06 JAN -4 PM 12:51

DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**BISCAYNE 152, LLC**

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

37182-133567

*1/5*

Electronic Filing Menu

Corporate Filing Menu

Help

(H06000001823)

**ARTICLES OF ORGANIZATION  
OF  
BISCAYNE 152, LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is: **Biscayne 152, LLC**

**ARTICLE II: - Address**

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

9551 East Bay Harbor Drive  
Bay Harbor Islands, Florida 33154

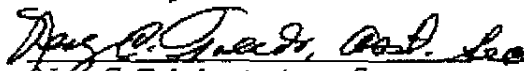
**ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

American Information Services, Inc.  
One Southeast Third Avenue, 28<sup>th</sup> FL  
Miami, Florida 33131

*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*

American Information Services, Inc.



Mary C. Toledo, Assistant Secretary

Registered Agent



Bernard Jacobson, Esq.

Authorized Representative of a Member

Signed and dated this 4<sup>th</sup> day of January, 2006.

06 JAN -4 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

(M2351469:1)  
(H06000001823)