

Division of Corporations

Frank Castoro

954-202-7390

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W060000001381

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 205-0383

From:  
Account Name : FRANCIS K. CASTORO, P.A.  
Account Number : I20020000153  
Phone : (954) 922-0505  
Fax Number : (954) 922-4674

W06-249

00500-00608-00671

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

PARK SANDS, LLC.

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No. 5665 P. 1

LAW OFFICES OF  
FRANCIS X. CASTORO, P.A.  
6555 POWRLINE ROAD, SUITE 301  
FORT LAUDERDALE, FLORIDA 33309  
TELEPHONE: 954-922-0505  
TELECOPIER: 954-491-8720

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JANUARY 3, 2006

e

Attn: ELECTRONIC FILING / FACSIMILE SECTION  
FLORIDA DEPARTMENT OF STATE  
P. O. Box 6327  
Tallahassee, Florida 32314

FAX NUMBER: : PAGE SENT: 3

RE: FORMATION OF LIMITED LIABILITY COMPANY

ACCOUNT NUMBER: I20020000153

LLC BEING FORMED: PARK SANDS, LLC

Dear Ms. Secretary:

Please find transmitted the following:

- A. ARTICLES OF ORGANIZATION
- B. DESIGNATION OF REGISTERED AGENT


BILLING: Please charge the Filing Fee to the above-noted Account.

After filing, please forward the CERTIFICATE representing the filing of the above LLC TO:

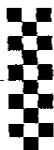
FRANCIS X. CASTORO, Esq.  
FRANCIS X. CASTORO, P.A.  
6555 POWRLINE ROAD, SUITE 301  
FORT LAUDERDALE, FLORIDA 33309

If you have any comments or questions, please do not hesitate to contact my office.

Sincerely,

  
Frank Castoro  
FXC/jg  
encls.

H06000008113



850-205-0381

Frank Castoro

1/4/2006 10:50 PAGE 001/001

954-202-7390

Florida Dept of State

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January 4, 2006

FLORIDA DEPARTMENT OF STATE

Division of Corporations

FRANCIS X. CASTORO, P.A.

SUBJECT: PARK SANDS, LLC

REF: W06000000249

850-245-6030

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

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6967.

Michelle Hodges  
Document Specialist

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DIVISION OF CORPORATION

P.O BOX 6327 - Tallahassee, Florida 32314

Jan. 3. 2006 2:17PM

Frank Castoro  
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**ARTICLES OF ORGANIZATION  
FOR  
PARK SANDS, LLC**

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**ARTICLE I - NAME**

The name of the Limited Liability Company is: **PARK SANDS, LLC**, a Florida Limited Liability Company.

**ARTICLE II - ADDRESS**

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

**9827 NW 64TH PLACE  
PARKLAND, FLORIDA 33076**

06 JAN -3 11:31  
FILED  
TALLAHASSEE, FLORIDA

**ARTICLE III - EFFECTIVE DATE / DURATION**

The Effective Date of this Filing is: **JANUARY 3, 2006**. The period of duration for the Limited Liability Company shall be: **PERPETUAL**.

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the Members and the name and address of the Managing Member is:

**ANDREW POLLACK - MANAGING MEMBER**

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

The right, if given, of the existing Members to admit additional Members and the terms and conditions of the admissions shall be only upon the express unanimous approval of the existing Members.

  
**ANDREW POLLACK - MANAGING MEMBER**

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

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No. 5721 P. 3

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: **PARK SANDS, LLC.**
2. The name and address of the Registered Agent and office is:  
**ANDREW POLLACK - MANAGING MEMBER  
9827 NW 64TH PLACE  
PARKLAND, FLORIDA 33076**

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.

  
BY: ANDREW POLLACK

JANUARY 3, 2005

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