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(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	





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COVER LETTER

TO: Registration Division of	n Section Corporations				
SUBJECT: Cros	swinds at Treasu	re Cove, LLC			
	(Name	of Limited Liability Co	ompany)		
Dear Sir or Madam:					
The enclosed Article	es of Correction and fee(s) a	are submitted for filing	•		
Please return all corr	respondence concerning this	s matter to the followin	ng:		
I. Barry Blax	berg, Esg.		•		
	(Name of Person)				
Blaxberg, Gra	yson, Kukoff & Seg	jal, P.A.	_		
	(Firm/Company)	•			, -
25 SE 2nd Av	enue, Suite 730		_		ç n
	(Address)			. **	
Miami, Florida	33131				دا
	(City/State and Zip Code)		- .		
For further informati	on concerning this matter,	please call:			ເກ ກຸວ
I. Barry Blaxbe	rg, Esq.	at (_ 305	381-7979 Ext. 309	, <u>.</u>	<u>ن</u> ش
(Na	ame of Person)	(Area Code a	& Daytime Telephone Number)		
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check	for the following amount:	:			
☑ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST Crossw		The name reasure Cov	of the limited lia	bility com	pany is:				
SECO (CH	_		s of organization						
Ø	incorre	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The zip code of the address contained in the Articles should be 48375 (and NOT 48365).							
	OR						3700 773	1.05	
	Was de		gned. The mann		h the docume	ent was defecti	vely signed and	1 1 1	
							: 4; .	`` 	
Dated:	Febru	arv 28			2006			_	
ouicu.		Signatur	of a member of		d representati	ve of a membe	<u> </u>		
		I. Barry I	Blaxberg, Esq Typed or Filing	printed na	me of signee	·			

Certified Copy:

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L06000013595 FILED 8:00 AM February 07, 2006 Sec. Of State gharvey

Article I

The name of the Limited Liability Company is: CROSSWINDS AT TREASURE COVE, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 22920 VENTURE DRIVE NOVI, MI. 48365

The mailing address of the Limited Liability Company is:

22920 VENTURE DRIVE NOVI, MI. 48365

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

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

I. BARRY BLAXBERG 25 SE 2ND AVENUE 730 MIAMI, FL. 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.

Registered Agent Signature: I. BARRY BLAXBERG

Article V

The pame and address of managing members/managers are:

Title: MGR BENTLEY MANAGEMENT, L.L.C. 22920 VENTURE DRIVE NOVI, MI. 48365 L06000013595 FILED 8:00 AM February 07, 2006 Sec. Of State gharvey

Article VI

The effective date for this Limited Liability Company shall be: 02/07/2006

Signature of member or an authorized representative of a member Signature: I. BARRY BLAXBERG