

Division of Corporations Public Access System

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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

FLORIDA/FOREIGN LIMITED LIABILITY CO.

bella vista at miami, llc

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Lizbility Company is:

BELLA VISTA AT MIAMI, LLC

(Most end with the words "Limited Limbility Company, "Limited Company" or their abbreviation "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:

933 NW 4 ST.

MIAMI, FL 33128

Mailing Address:

2840 SW 129 Avenue Miami, FL 33175

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 hosiness entity with an active Florida registration.)

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

Name: Recaredo Gutierrez

Plorida street address (P.O. Box NOT acceptable): 2840 SW 129 Avenue

City, State, and Zip: Miami, FL 33175

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, FS.

Registered Agent's Signature (REQUIRED)

RECAREDO GUTTERREZ

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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:

Name and Address:

2840 SW 129 Avenue Miami, FL 33175

ARTICLE V: Effective date, if other than the date of filing: (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.)

RECAREDO GUTIERREZ

Typed or printed name of signee

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