

W06000039763

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Fax Number : (850) 205-0383

Account Name : LEOPOLD KORN & LEOPOLD, P.A.
Account Number : T20010000025
Phone : (305) 935-3500
Fax Number : (305) 935-9042

2006 APR 20 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

WEST RIVER AT MIAMI, LLC

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ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

FIRST: The name of the limited liability company is:
West River at Miami, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
The mailing address is corrected to read 2840 SW 129th Avenue, Miami, FL 33175.

The address of the manager is corrected to read 2840 SW 129th Avenue, Miami, FL 33175.

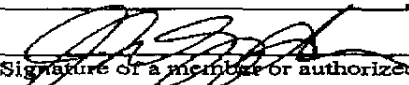
The zip code for the street address of the principal offices is corrected to read

2840 SW 129th Avenue, Miami, FL 33175.

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: April 20, 2006



Signature of a member or authorized representative of a member
Jennifer Snyder, Registered Agent

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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STATE OF FLORIDA
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**Electronic Articles of Organization
For
Florida Limited Liability Company**

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Article I

The name of the Limited Liability Company is:

WEST RIVER AT MIAMI, LLC

Article II

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

936 NW 6TH STREET
MIAMI, FL. US 33136

The mailing address of the Limited Liability Company is:

936 NW 6TH STREET
MIAMI, FL. US 33136

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:

LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BLVD.
STE. 501
AVENTURA, FL. 33180

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: JENNIFER SNYDER

Article V

The name and address of managing members/managers are:

Title: MGR
RECAREDO GUITTEREZ
936 NW 6TH STREET
MIAMI, FL. 33136 US

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Signature of member or an authorized representative of a member

Signature: RECAREDO GUITTEREZ