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Florida Department of State
Division of Corporations
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To:

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Fax Number : (850)205-0383

From:

Account Name : PADRO AND COMPANY, P.A.
Account Number : I20050000094
Phone : (305)500-9361
Fax Number : (305)500-9492

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Archiplan Citisquare Development II, LLC

Certificate of Status	0
Certified Copy	1
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05/12/2005 15:42

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DEPT. OF STATE

PAGE 03/05

850-205-0381

5/12/2005 10:54 PAGE 001/001 Florida Dept of State



May 12, 2005

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PADRO AND COMPANY, P.A.

SUBJECT: ARCHIPLAN CITIESQUARE DEVELOPMENT II, LLC
REF: W06000022056

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

The articles of incorporation must be prepared in compliance with section 607.0202, Florida Statutes. Please refer to this section of the law.

If you have any further questions concerning your document, please call (850) 245-6985.

Suzanne Hawkes
Document Specialist
New Filing Section

FAX Aud. #: W06000131671
Letter Number: R06A00033704

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Archiplex Citisquare Development II, LLC

(Must end with the words "Limited Liability 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:1221 Brickell Avenue, Suite 1500Miami, Florida 33166**Mailing Address:**1221 Brickell Avenue, Suite 1500Miami, Florida 33166**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 business entity with an active Florida registration.)

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

Jose F. Padro

Name

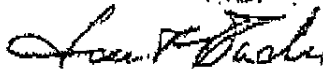
8325 NW 53 ST, Suite 102

Florida street address (P.O. Box NOT acceptable)

MiamiFL 33166

City, State, and Zip

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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:

Title:

"MGR" - Manager

"MGRM" - Managing Member

Name and Address:MGRRaimundo Onetto1221 Brickell Avenue Suite 11590Miami, FL 33131MGRJorge Rosenblat1221 Brickell Avenue, Suite 11590Miami, FL 33131MGRRaimundo Onetto1221 Brickell Avenue, Suite 11590Miami, FL 33131

(Use attachment if necessary)

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.)

Raimundo Onetto

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 50.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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