

Division of Corporations

**L06000059967** Page 1 of 1

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000155790 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

06 JUN 12 PM 12:24

DIVISION OF CORPORATIONS

Division of Corporations  
Fax Number : (850)205-0383

Account Name : FIELDSTONE LESTER SHEAR & DENBERG  
Account Number : I19990000180  
Phone : (305)357-5775  
Fax Number : (305)357-5534

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN 12 AM 9:13

FILED

*6-13  
Cull*

FLORIDA/FOREIGN LIMITED LIABILITY CO.

TIH LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:  
TIH, LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
18001 Collins Avenue, 31<sup>st</sup> Floor  
Sunny Isles Beach, Florida 33160

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

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

DAVID SHEAR,  
Name

201 Alhambra Circle, Suite 601  
Florida street address (P.O. Box NOT acceptable)

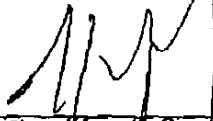
Coral Gables, FL 33134  
City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 JUN 12 AM 9:13

FILED

*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.*

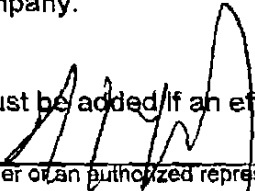


Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)



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.)

David Shear, Authorized Agent  
Typed or printed name of signee