Division of Corporations

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Division of Corporations

Fax Number : (850)205-0383

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

Account Number : Il9990000180 Phone : (305)357-5775

Fax Number : (305)357-5534 FIVISION OF CORPORATION

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

# CFH GROUP-OASIS AT NAPLES, LLC

Certificate of Status	0
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

CFH GROUP-OASIS AT NAPLES, LLC

#### ARTICLE II - Address:

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

6340 Sunset Drive Miami, FL 33143

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

<u>David Shear</u>
Fieldstone Lester Shear & Denberg, LLP
Name

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

Coral Gables, FL 33134 City, State, and Zip

Having been named as registered agent and to accept service of processfor the above stated limited liability company at the place designated in this certificate, I hereby accept the applicament by degistered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes delighing 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 pravided for in Chapter 608, F.S.

Rogistered 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 Representative
Typed or printed name of signee

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