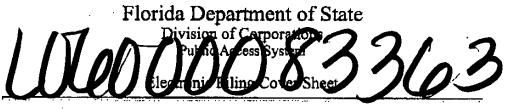
Page 1 of 1



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.

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To:

Division of Corporations

Fax Number

: (850)205-0383

from:

Account Name : ROTHSTEIN, ROSENFELDT, ADLER

Account Number : 072164000350 Phone : (954)522-3456 Fax Number : (954)527-8663 OIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED 36 AUG 23 PM 4: 15 VISION OF CORPORATIO

Caravan 1, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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Help





P22

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COVER LETTER

Division of Corporations		
SUBJECT: Caravan 1, LLC		
(Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Christina M. Kitterman, Esq.	_	
(Name of Person)		
Rothstein Rosenfeldt Adler		
(Firm/Company)	_	
401 East Las Olas Blvd. Ste. 1650		
(Address)	20	NAI0
Fort Lauderdale, FL 33301	2006 AUG	SECR Vision
(City/State and Zip Code)) 2	NA 유전 유전
For first and of formation and committee white most are when we have	23	25. 15. 15. 15. 15. 15.
For further information concerning this matter, please call:	A	- 중유(- Sas
Christina M. Kitterman, Esq. st (954) 522-3456	9: 44	STATE
(Name of Person) (Area Code & Daytime Telephone Number)	ŧ	SHC
Enclosed is a check for the following amount:		
▼ \$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Street/Courier Address Registration Section Registration Section		

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Must end with the words "Limited Liability Company, "Lit	1. 1.0 B .1 ' .11 ''. 477.0 P . 47	
	mited Company" or their abbreviation "ELC," or "I	 .,~)
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability	ty Company is:
Principal Office Address:	Mailing Address:	
55 NW 71st Street	65 NW 71st Street	
Mismi, FL 33150	Mlami, Florida 33150	
business entity with an active Florida registration.) The name and the Florida atreet address of the registered agent are: Christina M. Kitterman, Esq.		SECRETAR DIVISION OF U
Name		OF LO
•	vd., Ste. 1650	A PO
401 East Las Olas Bi		
	address (P.O. Box NOT acceptable)	STA OR A
Florida street Fort Lauderdale		REY OF STATE CORPORATIONS

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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	or Managing Member(s): wh Manager or Managing Member is as follows:
Title:	Name and Address:

MGRM	Andrew Kostas
	65 NW 71st Street
	Miami, Florida 33150
MGRM	Mike Coner
	15 West Las Olas Blvd.
	Fort Lauderdale, FL 33301
MGRM	Mike Saladino
	1216 Washington Avenue
	Miami, Florida 33139

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 8/22/2006 (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.)

Christina M. Kitterman, Esq.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

523 AM 9: L

SECRETARY OF STATE DIVISION OF CORPORATIONS

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