Electronic Filing Cover Sheet

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(((H06000228677 3)))



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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.

Account Number : I20000000088

Phone Fax Number

: (800)221-0102 : (212)564-6083

FLORIDA/FOREIGN LIMITED LIABILITY CO.

OAKS HUNTINGTON LLC

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

September 15, 2006

FLORIDA DEPARTMENT OF STATE Division of Corporations

NATIONAL CORPORATE RESEARCH

SUBJECT: OAKS HUNTINGTON LLC

REF: W06000040621

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

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist FAX Aud. #: H06000228677 Letter Number: 706A00055553

RECEIVED

OG SEP 15 PM 1: 07

OG SEP 15 PM 1: 07

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Oaks Huntington LLC (Must and with the words "Limited Liability Company, "Limited Company)

Must and with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC,")

ARTICLE II - Address:

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

Principal Office Address:

60 Broad Street, Suite 3503

New York, NY 10004

New York, NY 10004

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:

National Corporal	e Research	, Ltd., Inc.
N	une	
515 East	Park Avenu	e
Florida stree	t address (P.O	. Box NOT acceptable)
Tallahasses	· FL	32301
City, St	ate, 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) Print Name (& Title, if applicable)

(CONTINUED)
Page 1 of 2

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Titler	•	Name and Address:	
"MGRM" = Managirig I	viember		
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