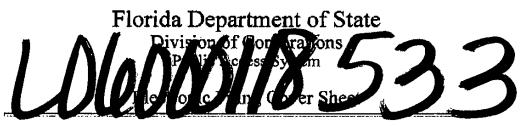
Division of Corporations



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.

(((H06000292684 3)))



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Division of Corporations

Fax Number : (850)205-0383

Account Name : FOWLER, WHITE, BURNETT, ET AL

Account Number : 071250001512

Phone

: (305)789-9200

Fax Number

: (305)789-9201

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LAKESIDE CROSSING COMMUNITY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00



Audit No. H 06000292684 3

ARTICLES OF ORGANIZATION

OF

LAKESIDE CROSSING COMMUNITY, LLC

ARTICLE I

The name of the limited liability company formed hereby is LAKESIDE CROSSING COMMUNITY, LLC (the "Limited Liability Company").

<u>ARTICLE II</u>

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The principal office and mailing address of the Limited Liability Company shall be as follows:

c/o Sobel Co.
26400 West Twelve Mile, Suite 50
Southfield, Michigan 48034

ARTICLE IV

The Registered Agent of the Limited Liability Company and his street address in the State of Florida are as follows:

Fred K. Lickstein, Esq. 1395 Brickell Avenue, 14th Floor Miarni, Florida 33131 SECRETARY OF STATE OIVISION OF CORPORATIONS

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ARTICLE V

The Limited Liability Company shall be member-managed by Managing Members.

Fred K. Lickstein,
as Authorized Representative of the Members

STATE OF FLORIDA)		
COUNTY OF MIAMI-DADE)	•	·· ,
Before me personally appe Members, a who is personally known as identification, to be	ared Fred K. Licks own to me, or D who the person who exec	tein, as Authorized produced uted the foregoing A	Representative of the rticles of Organization.
In witness whereof I have he	ereunto set my hand	and official seal this	1146 day of

NOTARY PUBLIC-STATE OF FLORIDA
Judith D. Rodman
Commission # DD469468
Expires: OCE 18, 2009
Bonded Thru Adantic Bonding Co., Inc.

Notaty Public

Print Name: TVD TH D ADDRESS

My Commission expires: (9/18/2019)

nde lea MIII: 30

Audit No. H06000292684 3

Audit No. H06000292684 3

CERTIFICATE OF DESIGNATION OF RESIDENT AGENT AND ACCEPTANCE OF DESIGNATION

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

- 1. The name of the limited liability company is LAKESIDE CROSSING COMMUNITY, LLC.
- 2. The name and address of the Registered Agent and Office is:

Fred K. Lickstein, Esq. 1395 Brickell Avenue, 14th Floor Miami, Florida 33131

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

Fred K. Lickstein, Registered Agent

Date: December 11, 2006

LAKESIDE CROSSING COMMUNITY, LLC

Fred K. Lickstein,

as Authorized Representative

of the Members

Audit No. H06000292684 3

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