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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Twins Property Management LLC

Certificate of Status	0
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FAX AUDIT #

1070000184413

**ARTICLES OF ORGANIZATION  
OF  
Twins Property Management LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **Twins Property Management LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 8221 SW 140 Court, Miami, Florida 33183.

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Christina Valendo, 12345 SW 151 St, Apt 109, Miami, Florida 33186. Located in the County of Dade.

**ARTICLE IV DURATION**

The duration for the limited liability company shall be: 12/31/2047.

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Maria Amaya, 8221 SW 140 Court, Miami, Florida 33183



Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200, Madison, WI 53717

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Twins Property Management LLC**

The name and address of the registered agent and office is Christina Valendo, 12345 SW 151 St, Apt 109, Miami, Florida 33186. Located in the County of Dade.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:   
Christina Valendo

Date: 01/22/07

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