

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CAY SAL HOLDINGS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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EFFECTIVE DATE 3-3-07

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Mar. 06 2007 01:31PM P2/3
Mar. 06 2007 10:44AM P1

H 07 000 059 446

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cay Sar Holdings, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:

1401 BRICKELL AVE,
SUITE 500
MIAMI, FLORIDA, 33131

Mailing Address:

1401 BRICKELL AVE
SUITE 500
MIAMI, FLORIDA 33131

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

(The Limited Liability Company operates here 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:

GERARDO A. VAZQUEZ, P.A.

Name

1401 BRICKELL AVE, SUITE 500

Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33131

City, State, 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 603, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

EFFECTIVE DATE 3-3-07 (CONTINUED)
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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address

~~XXXXXXXX~~ MGR

SUNSET VISTA FINANCE
CORPORATION

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3/3/07 (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 Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

GERARD A. KAROL

Typed or printed name of signer

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)

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