

07000049322

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

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.

((H07000127406 3)))



H070001274063ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : CARLOS A. SOMOZA P.L.
Account Number : I20070000078
Phone : (305) 301-4131
Fax Number : (305) 270-0159

FILED
2007 MAY -9 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Luma, LLC

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

RECEIVED

07 MAY -9 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

07-49322
5/8/2007
al

Audit No.: H07000127406 3

ARTICLES OF ORGANIZATION

FOR

LUMA, LLC

A Florida Limited Liability Company

The undersigned, for the purpose of forming a limited liability company under and pursuant to Florida Statutes 608 entitled the Florida Limited Liability Company Act, hereby adopts the following Articles of Organization for such company:

1. **Name.** The name of the Limited Liability Company shall be:

LUMA, LLC

2. **Duration/Continuation.** The period of this company's duration shall be fifty (50) years unless terminated earlier or later extended in accordance with the relative provisions of the Operating Agreement of the company.

3. **Address.** The mailing address and street address of the principal office of the Limited Liability Company is 355 Casuarina Concourse, Coral Gables, Florida 33143.

4. **Registered Agent and Office.** The name and street address of the initial registered agent and office for the Limited Liability Company is as follows: Carlos A. Azar, 355 Casuarina Concourse, Coral Gables, Florida 33143.

Having been named as Registered Agent and to accept service of process for the above stated Limited Liability Company, 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.

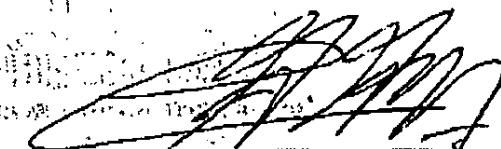

CARLOS A. AZAR, Registered Agent

Audit No.: H07000127406 3

5. **Management of Company.** The Limited Liability Company is to be member-managed. The name and address of the Member who is to manage is:

Title**Name and Address**

MGRM

Azar Family Limited Partnership
355 Casuarina Concourse, Coral
Gables, Florida 33143Dated this 4th day of May, 2007:

CARLOS A. AZAR, as Trustee of the
Carlos A. Azar Living Trust dated February
28, 2006, Managing Member of CHAPA
MANAGEMENT, General Partner of the
AZAR FAMILY LIMITED
PARTNERSHIP

2007 MAY -9 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED