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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Falls, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen A. Taylor, Esq.
(Name of Person)

Stephen A. Taylor, PL
(Firm/Company)

44 W. Flagler Street, Suite 675
(Address)

Miami, Florida 33130
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen A. Taylor at (305) 722-0091
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION OF

THE FALLS, LLC

ARTICLE I

NAME

The name of this Limited Liability Company shall be THE FALLS, LLC (the "Company").

ARTICLE II

PRINCIPAL PLACE OF BUSINESS

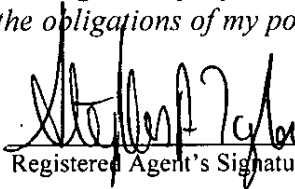
The principal place of business of the Company and mailing address shall be 9051 SW 162 Lane, Miami, FL 33157, and such other place or places as the member(s) from time to time may determine.

ARTICLE III

**INITIAL REGISTERED OFFICE AND
REGISTERED AGENT**

The initial registered agent of the Company shall be SAT Registered Agents, LLC. The address of the initial registered agent is 44 West Flagler Street, Suite 675, Miami, FL 33130.

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)

ARTICLE IV
MANAGEMENT

The Company will be a manager-managed company, and will be managed by a manager or managers who may be, but are not required to be, a member of the Company. The name and address of the manager who will serve as manager until the first annual meeting of members or until his successor is selected and qualified in accordance with the Operating Agreement or applicable law is:

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TALLAHASSEE, FLORIDA

Articles of Organization of
The Falls, LLC
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Indira Blyskal
9051 SW 162 Lane
Miami, FL 33157

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 23 day of May, 2007, effective upon filing same with the Florida Department of State.


THE FALLS, LLC

BY:


Indira Blyskal, Member and Manager

STATE OF FLORIDA)
) ss:
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 23rd day of MAY, 2007, by INDIRA BLYSKAL, who did execute the foregoing Articles of Organization as the Manager and Member of THE FALLS, LLC, who is personally known to me, or who has produced _____ as identification, and being first duly sworn, acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

NOTARY PUBLIC STATE OF FLORIDA
 Aixa Vergara
Commission # DD506692
Expires: FEB. 28, 2010
Bonded Thru Atlantic Bonding Co., Inc.


Signature - NOTARY PUBLIC

AIXA Vergara
Printed Name of NOTARY PUBLIC

DD506692
Commission Number

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TALLAHASSEE, FLORIDA

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