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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

Wiles-Coral Ridge Mezzanine MM, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION OF WILES-CORAL RIDGE MEZZANINE MM, LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. NAME. The name of the Limited Liability Company is WILES-CORAL RIDGE MEZZANINE MM, LLC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing address for the Company is: 1509 West Cypress Creek Road, Suite 409, Fort Lauderdale, Florida, 33309.
- 3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Betty Williamson at 1509 West Cypress Creek Road, Suite 409, Fort Lauderdate, Florida, 33309.
- 4. MANAGEMENT. The business of the limited liability company shall be managed by one or more members and is, therefore, a member-managed company.

The undersigned has executed these Articles of Organization on the \_\_\_\_\_ day of June, 2007.

Adrienne Kelley, Authorized Representative

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## CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

- The name of the limited liability company is: WILES-CORAL RIDGE MEZZANINE MM, LLC.
- The name and address of the registered agent and office is: 2.

Betty Williamson 1509 West Cypress Creek Road, Suite 409 Fort Lauderdale, Florida 33309

Set the second second second 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 its 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.

Williamson, Registered Agent

Date: June \ , 2007

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