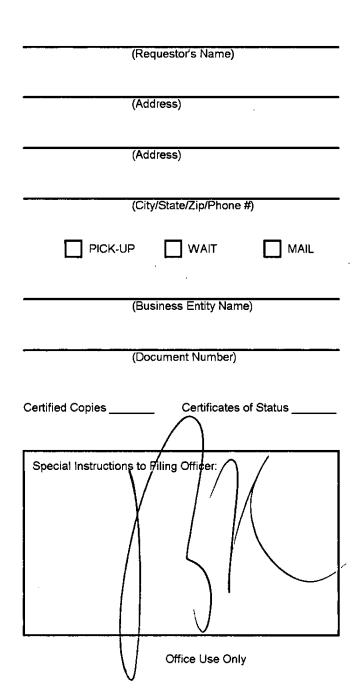
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DEFARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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### LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCI	UMENT NUMBER(S), (if	known):	*
SAUZET ASSOC	iATES LLC	•	
(Corporation Name)	(Document #)		
2.			
(Corporation Name)	(Document #)		
3.			·
(Corporation Name)	(Document #)		
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(Corporation Name)	(Document #)		
Walk in Pick up time	2.00	Certified Copy	
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<u>NEW FILINGS</u>	<u>AMENDMENTS</u>		
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R Change of Regist Dissolution/With Merger		
OTHER FILINGS	REGISTRATION/Q	UALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partners! Reinstatement Trademark Other	hip 	
.,		Examiner's Initials	

CR2E031(7/97)

## ARTICLES OF ORGANIZATION OF SAUZET ASSOCIATES LLC



#### **ARTICLE I - NAME**

The name of this limited liability company is SAUZET ASSOCIATES LLC (hereinafter "the Company").

#### **ARTICLE II - ADDRESS**

The mailing address and principal office is:

2701 S. Bayshore Drive, Suite 402 Miami, Florida 33133

#### ARTICLE III: INITIAL REGISTERED OFFICE AND AGENT

The name and mailing address of the initial registered office and the initial registered agent of the Company is:

Eric Sauzet 2701 S. Bayshore Dr., #402 Miami, Florida 33133

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

Eric Sauzet-Registered Agent

#### **ARTICLES IV - MANAGEMENT**

The Company will be managed by one (1) manager and is, therefore a manager-managed company.

> **Eric Sauzet** 2701 S. Bayshore Dr., #402 Miami, Florida 33133

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

**ERIC SAUZET, Authorized Representative** 

#### **ORGANIZER**

IN WITNESS WHEREOF, I have made and subscribed these Articles of
IN WITNESS WHEREOF, I have made and subscribed these Articles of Organization this
facula To
MARCELLE POIRIER
<b>,</b>
CTATE OF ELODIDA
STATE OF FLORIDA )
) SS: COUNTY OF MIAMI-DADE
COUNTY OF WHAWH-DADE
I HEREBY CERTIFY that on this day, personally appeared before me
MARCELLE POIRIER who is well known to me to be the person described in
and who executed these Articles of Organization as Organizer, and acknowledged
before me that he executed the same freely and voluntarily for the purposes therein
expressed.
~L(
SWORN TO AND SUBSCRIBED before me this 7 of
<u> </u>
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A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Notary Public State of Florida Joseph B Ryan III
My Commission DD445481 Expires 09/27/2009  NOTARY PUBLIC State of Florida at large

My commission expires: