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COVER LETTER

TO: Registration Section Division of Corporations	
SHIBLECT: THE CASTLES AT ROLLING OAKS, LLC	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
ELLIOT DUMBROFF - REGISTERED AGENT (Name of Person)	
C/O LIMANS INTERNATIONAL, INC. (Fine/Company)	
200 SW 172 AVE	
(Address)	a
PEMBROKE PINES, FLORIDA 33029	
(City/State and Zip Code)	
For further information concerning this matter, please call;	ARY U
ELLIOT DUMBROFF - AGENT in 954 433 - 8980 (Name of Person) (Area Code & Daytime Telephone Number)	SECRETARY OF OKATIONS VISION OF CORPORATIONS O7 JUN 26 PM 1: 50
Unclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigsiz \$\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\substack{\	

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

THE CASTLES AT ROLLING OAKS, LLC.

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

ARTICLE II - Address:

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

Principal Office Address	;
	_

Mailing Address:

200 SW 172 AVE

PEMBROKE PINES, FLORIDA 33029

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve 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:

ELLIOT DUMBROFF - REGISTERED AGENT

Name

200 SW 172 AVE

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

PEMBROKE PINES , FL 33029 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 pegistered agent as provided for in Chapter 608, F.S.,

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s);

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

Tifle: "MGR" – Manager	Name and Address:	
"MGRM" – Managing Member		
MGR	ĻĪMAS INTERNA LIQNAL, INC	
- here	200 SW 172 AVE	
	PEMBROKE PINES, FLA. 33029	
MGR	JAY INVESTMENTS PROPERTIES, INC	
Princetto duna distribuição	18331 PINES BLVD. #160	
	PHMBROKE PINES, FLA. 33029	
MGR	TPM INDUSTRIES, LLC	O. DIVE
	19230 NW 12 MANOR	T J
	PEMBROKE PINES, FLA. 33029	JUN 26
		26 For
		PH REPORT
		- 32
(Use attachment if necessary)		1:50

ARTICLE V: Effective date, if other than the date of filing: JULY 2, 2007 (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 Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ELLIOT DUMBROFF - REGISTERED AGENT

Typed or printed name of signee

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)