

LO7000077476

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

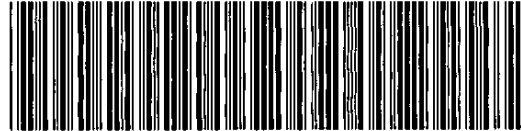
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TALLAHASSEE, FLORIDA

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07 JUL 27 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 029483 83930A

AUTHORIZATION

COST LIMIT : \$ 155.00

FILED
07 JUL 27 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : July 27, 2007

ORDER TIME : 10:43 AM

ORDER NO. : 029483-005

CUSTOMER NO: 83930A

DOMESTIC FILING

NAME: DASSETT-CYPRESS, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney - EXT. 2916

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I
NAME

The name of the limited Liability Company is Dasset-Cypress, LLC.

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 8890 West Oakland Park Boulevard, Suite 201, Sunrise, FL 33351.

ARTICLE III
MANAGEMENT

The Limited Liability Company is to be managed by one or more of the members and the name and address of the initial managing member is:

Daniel Hotte

8890 West Oakland Park Boulevard
Suite 201
Sunrise, Florida 33351

ARTICLE IV
EFFECTIVE DATE

The effective date of this Limited Liability Company is as of the date of the filing of these Articles.

ARTICLE V
REGISTERED AGENT, REGISTERED OFFICE
& REGISTERED AGENT'S SIGNATURE


The name and the Florida street address of the registered agent are:


ROBERT W. FRAZIER, JR., ESQ.
FRAZIER, HOTTE & ASSOCIATES, P.A.
6550 North Federal Highway, Suite 220
Fort Lauderdale, Florida 33308

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

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TALLAHASSEE, FLORIDA

ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS
PROVIDED FOR IN CHAPTER 608, F.S.


Resident Agent's Signature
Robert W. Frazier, Jr., Esq.


Signature of a member or an authorized
representative of a member

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

Robert W. Frazier, Jr., Esq., authorized representative
Typed or Printed name of signee

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