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FAX No.

P. 001

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : POINTE DEVELOPMENT COMPANY  
Account Number : I20050000030  
Phone : (305) 865-1923  
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

South Lake Village Development I, LLC

Certificate of Status	0
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8/9/2007

FAX AUDIT# H070002012533

**ARTICLES OF ORGANIZATION**

**OF**

**SOUTH LAKE VILLAGE DEVELOPMENT I, 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: SOUTH LAKE VILLAGE DEVELOPMENT I, LLC (the "Company").
2. **Mailing and Street Address of Principal Office.** The mailing and street address for the Company is: 1111 Kane Concourse, Ste. 401F, Bay Harbor Islands, FL, 33154.
3. **Registered Agent.** 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: Alan Sakowitz, 1111 Kane Concourse, Ste. 401F, Bay Harbor Islands, FL 33154.
4. **Management.** The business of the limited liability company shall be managed by one or more managing members and is, therefore, a member-managed company.

The undersigned has executed these Articles of Organization on the 9<sup>th</sup> day of August, 2007.

By: 

Alan Sakowitz, Authorized Representative

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FAX NO.

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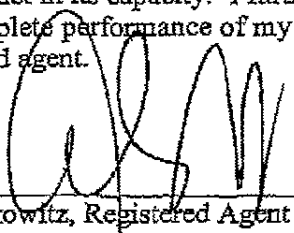
**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

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.

1. The name of the limited liability company is: SOUTH LAKE VILLAGE DEVELOPMENT I, LLC.
2. The name and address of the registered agent and office is:

Alan Sakowitz  
1111 Kane Concourse, Ste. 401F  
Bay Harbor Islands, FL 33154

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.

  
Alan Sakowitz, Registered Agent

8/9/07  
(Date)

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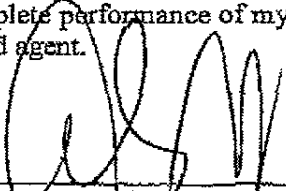
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\_\_\_\_\_  
Alan Sakowitz, Registered Agent

8/9/07  
(Date)

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