

OCT. 22. 2007 9:37AM  
Division of Corporations

NO.099 P.1  
Page 1 of 1

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Florida Department of State  
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Artesia Management, LLC

Certificate of Status	0
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H07000260691 3

**ARTICLES OF ORGANIZATION**

**OF**

**ARTESIA MANAGEMENT, LLC**

**ARTICLE I**  
**NAME**

The name of the Limited Liability Company is: Artesia Management, LLC.

**ARTICLE II**  
**PRINCIPAL OFFICE AND MAILING ADDRESS**

The mailing address and the street address of the principal address of the Limited Liability Company is: 5309 SW 111<sup>th</sup> Terrace, Davie, Florida 33328.

**ARTICLE III**  
**INITIAL REGISTERED AGENT AND OFFICE**

The name of the initial registered agent of this company is: Jim Zacharias. The street address of the initial registered office of the Limited Liability Company in the State of Florida is: 5309 SW 111<sup>th</sup> Terrace, Davie, Florida 33328.

**ARTICLE IV**  
**MANAGER(S) OR MANAGING MEMBER(S)**

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

MGRM

Jim Zacharias  
5309 SW 111<sup>th</sup> Terrace  
Davie, Florida 33328

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization effective this 18 day of October, 2007.

  
\_\_\_\_\_  
Jim Zacharias, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 or 608.507, 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: Artesia Management, LLC
2. The name and address of the registered agent and office is:

Jim Zacharias  
5309 SW 111<sup>th</sup> Terrace  
Davie, Florida 33328

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 registered agent.

  
\_\_\_\_\_  
Jim Zacharias

10/18/07  
(Date)

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