Florida Department of State
Division of Corporations
Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H080000368873)))



H080000368873ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132 Phone : (305)374-7580 Fax Number : (305)351-2122 08 FEB 12 AH 8: 12

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

FIELDSTONE NEWCO, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

J. BRYAN

FEB 1 3 2008

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT NO. HOBO00036887 3

## ARTICLES OF ORGANIZATION OF FIELDSTONE NEWCO, LLC

- 1. The name of the limited liability company is FIELDSTONE NEWCO, LLC.
- 2. The mailing address and the street address of the principal office of the limited liability company are 700 N.W. 107<sup>th</sup> Avenue, Miami, Florida 33172.
- 3. The name and street address of the initial registered agent of the limited liability company are C T Corporation System at 1200 South Pine Island Road, Plantation, Florida 33324.

IN WITNESS WHEREOF, these Articles of Organization have been executed by the below named authorized representative of a member of the limited liability company effective as of the 11<sup>th</sup> day of February, 2008.

//s// Kendall Sparkman Kendall Sparkman, Authorized Representative

SECRETARY OF STATE SECRETARY OF STATE OR CORPORATIONS

. . . . .

H08000036887 3

## 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

of the Limited Liability Company is:	
 and the Florida street address of the registered agent and office are:	***************************************
C T Corporation System	80 81A10
(Name)	FEB SIGNE
1200 South Pine Island Road	B 12
Florida Street Address (P.O. Box NOT ACCEPTABLE)	A PO
Plantation, Florida 33324	<b>→</b> ⊃G
City/\$tate/Zip	ATIONS B: 12

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 as provided for in Chapter 608, Florida Statutes.

(Signature)

C T Corporation System

**Madonna** Cuddihy Special Assistant Secretary

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) Certificate of Status (optional)

FLOST - 6/09/05 C T System Online