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250 Monroe Ave. NW, Ste. 200 Grand Rapids, MI 49503-2251 Telephone (616) 774-8000 Fax (616) 774-2461

> Ann Arbor, Michigan Traverse City, Michigan www.shrr.com

> > June 2, 2008

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VIA OVERNIGHT MAIL

Registration Section Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE:

Villa Caletas, LLC

Dear Reader:

Enclosed please find for filing Articles of Organization for Villa Caletas, LEC I have en an additional copy of the Articles of Organization for certification and a check in the amount of \$160.00 for the filing fees. Please return the certified copy and confirmation to my office in the enclosed selfaddressed, overnight mailing envelope.

Sincerely,

SMITH HAUGHEY RICE & ROEGGE

Jun G. Mad James G. Black

JGB:smk Enclosures

COVER LETTER

TO:	Registration Se Division of Cor						
SUBJ	ьст. Villa Ca	aletas, LLC					
SUBJ	ECT:	(Name of Limit	ted Lia	bility Compa	iny)		
The e	nclosed Articles of	Organization and fee(s) are	submi	tted for filing	; .		
Please	e return all correspo	ondence concerning this mat	ter to t	the following	:		
	James G. I	Black					
			(Name	e of Person)			_
	Smith, Hau	ughey, Rice & Ro	egg	е			
			(Firm	(Company)			_
	250 Monro	e Avenue, Suite	200			7	
			(A	ddress)		To again	
	Grand Rap	oids, MI 49503				AHAS RE IX	7
		(Cit	ty/State	and Zip Code)	1	Caralles Targette
For fu	urther information o	concerning this matter, pleas	e call:				
				040	450 4050		
Jan	nes G. Black	Cof Person)	at (_	616 ·	458-4253 & Daytime Telep		
	(iname)	or reison)		(Mea Cou	e & Daytime Telep	mone reamoer)	
Enclo	sed is a check for	r the following amount:					
□\$125	5.00 Filing Fee 【	\$130.00 Filing Fee & Certificate of Status	(155.00 Filin Certified Cop additional copy	ру	\$160.00 Filing Fee, Certificate of Status of Certified Copy (additional copy is enclose	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding ecutive Center Ci	rcle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Villa Caletas, LLC. (Must end with the words "Limited Liability)	ity Company "L.L.C." or "LLC")				
ARTICLE II - Address:	incipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
1199 Hillsboro Mile, Unit 129 Hillsboro Beach, FL 33062	1199 Hillsboro Mile, Unit 129 Hillsboro Beach, FL 33062				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)					
The name and the Florida street address of the re					
Marwan Rifka	Unit 129				
Name Pri					
1199 Hillsboro Mile, Unit 129					
Florida street address (P.O. Box NOT acceptable)					
Hillsboro Beach, FL	3 <u>3</u> 2062 <u>SS</u> <u>T</u> T				
City, State, a	nd Zip				
	accept service of process for the above stated limited his certificate, I hereby accept the appointment as				

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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

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

<u>Title:</u>	Name and Address:					
"MGR" = Manager						
"MGRM" = Managing Member						
MGR	David G. Byker					
	PO Box 158					
	Grandville, MI 49468					
MGR	lan Phair					
	PO Box 158					
	Grandville, MI 49468					
MGR	Patrick V. Hundley					
WGR	Patrick V. Hundley PO Box 158					
	Grandville, Mt 49468					
	Grandvine, ivii 49400					
(Has attachment if managemy)						
(Use attachment if necessary)						
ADTICLE V. Effective data if other than	the date of filing: (OPTIONAL)					
ARTICLE V: Effective date, if other than	ist be specific and cannot be more than five business days prior					
to or 90 days after the date of filing.)	st be specific and cannot be more than five business days prior					
to or 90 days after the date of fining.)						
REQUIRED SIGNATURE:						
	0 0					
$\langle \chi \rangle$	5 64.1					
Mun	The Vouch					
Signature of a me	ember or an authorized representative of a member 🗧 🛎					
(In accordance wi	th section 608.408(3), Florida Statutes, the execution					
of this document of	constitutes an affirmation under the penalties of perjury					
that the facts sta	of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)					
James G.	James G. Black					
	Typed or printed name of signee					
	D_{l0}					
Filing Fees:	» · ω					

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)