

LO80000 786 30

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

EFFECTIVE DATE 8/19/08

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

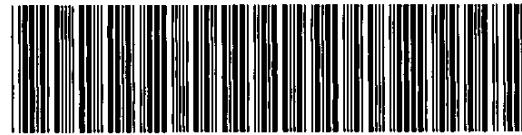
108AUU46388

Office Use Only

B. KOHR

AUG 18 2008

EXAMINER



500134416835

08/18/08--01021--025 **160.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

08 AUG 18 AM 10: 36

FILED

08 AUG 18 PM 12: 25

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Sunstate Research

Requester's Name

Address

City/State/Zip

Phone #

6565454

EFFECTIVE DATE 8/14/08

Office Use Only

STATE OF FLORIDA
TALLAHASSEE, FLORIDA
08 AUG 18 PM 12:25
FILED

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Charles Steele Management
(Corporation Name) (Document #)
2. Company LLC
(Corporation Name) (Document #)
3. _____ (Document #)
4. _____ (Document #)

file 2nd

Walk in Pick up time _____
 Mail out Will wait Photocopy Certified Copy
 Certificate of Status

NEW FILINGS

Profit
 Not for Profit
 Limited Liability
 Domestication
 Other

OTHER FILINGS

Annual Report
 Fictitious Name

AMENDMENTS

Amendment
 Resignation of R.A., Officer/Director
 Change of Registered Agent
 Dissolution/Withdrawal
 Merger

REGISTRATION/QUALIFICATION

Foreign
 Limited Partnership
 Reinstatement
 Trademark
 Other

Examiner's Initials

EFFECTIVE DATE 8/14/04

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Charles Steele Management Company, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")



ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

c/o Shutts & Bowen LLP
201 South Biscayne Boulevard, Suite 1600
Miami, Florida 33131

Mailing Address:

Post Office Box 682038
Miami, Florida 33168

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Louis Nostro

Name

c/o Shutts & Bowen LLP, 201 S. Biscayne Blvd., Ste. 1600

Florida street address (P.O. Box NOT acceptable)

Miami

FL 33131

City, State, and Zip

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:

Title:

"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

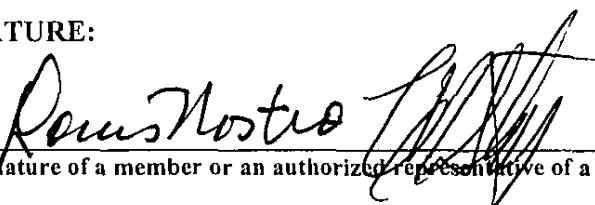
Charles R. Steele, Jr.

c/o Shutts & Bowen LLP, 201 S. Biscayne Blvd., Ste. 1600
Miami, Florida 33131

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 14, 2008 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Charles R. Steele, Jr.
Signature of a member or an authorized representative of a member.

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

Charles R. Steele, Jr.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)