

L08000094721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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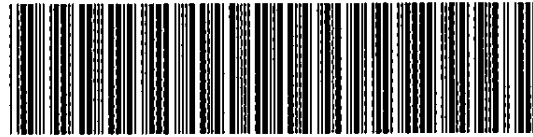
(Business Entity Name)

(Document Number)

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B. KOHR
OCT - 7 2008
EXAMINER

FILED
08 OCT - 6 AM 9:45
DEPT. OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 748432 7742A

AUTHORIZATION :

COST LIMIT : \$155.00

ORDER DATE : October 6, 2008

ORDER TIME : 3:02 PM

ORDER NO. : 748432-005

CUSTOMER NO: 7742A

DOMESTIC FILING

NAME: SOUTH FLORIDA EQUITABLE FUND
LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

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08 OCT -6 AM 9:45
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**ARTICLES OF ORGANIZATION
FOR
SOUTH FLORIDA EQUITABLE FUND LLC
a Florida limited liability company**

**ARTICLE 1
NAME**

The name of this limited liability company is South Florida Equitable Fund LLC, a Florida limited liability company.

**ARTICLE 2
ADDRESS**

The mailing address and street address of the principal office of the limited liability company is 265 N.E 24th Street, Suite 501, Miami, FL 33137 or at such other location as may hereafter be determined by the Managing Member.

**ARTICLE 3
REGISTERED AGENT, REGISTERED
OFFICE AND REGISTERED AGENT'S SIGNATURES:**

The name and the Florida street address of the registered agent is: Rene Lopez, whose address is 265 N.E 24th Street, Suite 501, Miami, FL 33137.

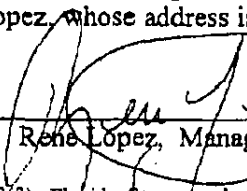
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the property 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.



Rene Lopez

**ARTICLE 4
MANAGEMENT AND MEMBERS**

The limited liability company is to be managed by the Member. The name and address of the Managing Member is Rene Lopez, whose address is 265 N.E 24th Street, Suite 501, Miami, FL 33137.



Rene Lopez, Managing Member

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

FILED
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TALLAHASSEE, FLORIDA