

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.

(((H08000231654 3)))



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:

: NATIONAL CORPORATE RESEARCH, LTD. Account Name

Account Number : I2000000088 Phone : (212)947-7200 Fax Number : (212)564~6083

Help

FLORIDA/FOREIGN LIMITED LIABILITY CO.

TAMANA, LLC

Corporate Filing Menu

			Certificate of Status	0	
prin.	59	HA P	Certified Copy	1	
LL!	ë	55	Page Count	02	
>	7	12 m	Estimated Charge	\$155.0	
	ထ			· · · · · · · · · · · · · · · · · · ·	
\circ	l 	ASS			

OCT 0 9 2008

EXAMINER

Electronic Filing Menu

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Tamana, LLC	
(Must end with the words "Limited Limbility 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:	T
Principal Office Address: Mailing Address:	m
60 Broad Street Soite 3503 New York, NY 1000+ New York, NY 1000+ Soite 3603 New York, NY 1000+ Soite 3603 Soite 3603 Soite 3603 Soite 3603 Soite 3603	, O
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 cutity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
Talcor Commercial Real Estate Services, Mc.	
1018 Thomasville Parsurte 2004 Florida street address (P.O. Box NOT acceptable)	
Tailahastee Ft 32303	

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..

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

3/

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MER င္ S (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (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: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Planida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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)

Page 2 of 2

Typed or printed name of signee