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C. LEWIS
NOV 1.22008
EXAMINER

COVER LETTER

TO:	Registration Division of C			• 1	
SUBJE	CT: KU	RATA MIAMI CONDO,			
		(Name of Lim	ited Liab	ility Company)	
The en	closed Articles	of Organization and fee(s) ar	e submitt	ed for filing.	
Please	return all corres	pondence concerning this ma	atter to the	e following:	
	D	AVID M. LA SALLE,	ESQ.		
			(Name o	f Person)	
	L	AW OFFICES OF MITS	UMORI	& LA SALLE	
			(Firm/C	ompany)	i
	4	20 East Third Stre	et, Su	ite 1003	
•			(Add	iress)	
	L	os Angeles, Califo	rnia	90013	
•		(C	ity/State a	nd Zip Code)	
For furt	ther information	concerning this matter, plea	se call:		(
]	DAVID M. L	A SALLE	at (213 628-629	
	(Nam	e of Person)		(Area Code & Daytime Tel	ephone Number)
Enclos	ed is a check f	or the following amount:			
□ \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	5.00 Filing Fee & Triffed Copy ditional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY TALLAHASSEE, FLORIDA

ARTICLE I - Na	me:
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The name of the Limited Liability Company is:

KURATA MIAMI CONDO, 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:	Mailing Address:
420 East Third Street	420 East Third Street
Suite 603	Suite 603
Los Angeles, California 90013	Los Angeles, California 90013

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:

KEVYN D. KURATA

7520 Southwest 59 Place, Unit 1 Florida street address (P.O. Box NOT acceptable)

 $\frac{\text{Miami, Florida 33143}_{FL}}{\text{City, State, and Zip}}$

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: 10 NOV 10 PM 2: 13

MGRM	FRED K. KURATA, M.D.	
	420 East Third Street, Suite 603	
	Los Angeles, California 90013	
		19-11-11-11-11-11-11-11-11-11-11-11-11-1
(Use attachment if necessary)		_
LE V: Effective date, if other than the	na data of filing:	(OPTIONAL)
ffective date is listed, the date must		

Signature of a member of 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.)

FRED K. KURATA, M.D.

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)