Division of terporatives Florida Department of State Division of Corporations Public Access System	
Electronic Filing Cover Sheet	<u></u>
Note: Please print this page and use it as a cover sheet. Type the number (shown below) on the top and bottom of all pages of the d	
(((H09000025930 3)))	
Note: DO NOT hit the REFRESH/RELOAD button on your browse page. Doing so will generate another cover sheet.	
To: Division of Corporations Fax Number (250)517-5383	ZIOSI
	<b>TALL AHASSEE. FLORIDA</b>
Division of Corporations Fax Number : (850)617-6383 From: Account Name : SHUTTS & BOWEN, LLP Account Number : 076447000313 Phone : (305)358-6300	EB -4 AN 8: 34 ETARY OF STATE AHASSEE. FLORIDA

Corporate Filing Menu

FEB - 5 2009

. . . . . .

EXAMINER

.

Electronic Filing Menu

FEB-04-2009 13:04 From: 34.00 € H09000025930 3

## ARTICLES OF ORGANIZATION OF GAMMA SUB I, LLC

## ARTICLE I Name

The name of the Limited Liability Company (the "Company") is:

GAMMA SUB I, LLC

## ARTICLE 11 Address

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

9840 S.W. 77 Avenue Suite 301 Miami, Florida 33156 ARTICLE III Registered Agent and Registered Office The name and the Florida street address of the registered agent are: Paulina Cervantes 9840 S.W. 77 Avenue # 202

Date: February 4, 2009

Bv:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 608, F S

Miami, Florida 33156

ame: Paulina Cervantes

H09000025930 3

Name: Patricio Cervantes, Authorized Representative