Page 002

Page 1 of 1

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

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.

(((H09000084963 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:

: BROAD AND CASSEL (BOCA RATON) Account Name

Account Number : 076376001555 Phone

: (561)483-7000

Fax Number

: (561)218-8960

FLORIDA/FOREIGN LIMITED LIABILITY CO.

5 GRAY BLUFF PLACE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

J. BRYAN

APR 1 0 2009

Electronic Filing Menu

Corporate Filing Menu

4/9/2009



7777 GLADES ROAD
SUITE 300
BOCA RATON, FLORIDA 33434
TELEPHONE: 561.483.7000
FACSIMILE: 561.483.7321
www.broadandcassel.com

TELECOPIER TRANSMITTAL

DATE:

Thursday, April 09, 2009 4:31:00 PM

To:

FL Dept of State

ADDRESS:

TELECOPIER PHONE NO.:

18506176383

CONFIRMATION PHONE NO.:

FROM:

Daisy Rodriguez

TOTAL NUMBER OF PAGES:

04 (including cover)

CLIENT AND MATTER:

41073-0001



MESSAGE:

PLEASE NOTIEV	LIS IMMEDIATRI V	IF ALL PAGES	WERE NOT RECEIVED	АТ 561.	483,7000
F LEASE INCHET	OP HAIMEDIVIER I	IL WELL VOICE	ALTERNATION RECEIVED	1 TO 1 2 CO 1 .	105.7000

FAX OPERATOR:

FIRST ATTEMPT:

SECOND ATTEMPT:

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS ATTORNEY-CLIENT PRIVILEGED AND CONFIDENTIAL. IT IS INTENDED FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

BOCA RAION FT. LAUDERDALE

Miami

ORLANDO

TAMPA

TALLAHASSEE

WEST PALM BEACH

Fax Audit Number: H09000084963 3

ARTICLES OF ORGANIZATION

OF

5 GRAY BLUFF PLACE, LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of the limited liability company shall be: 5 GRAY BLUFF PLACE, LLC.

ARTICLE II

The street address of the principal office of the limited liability company shall be 1877 S. Pederal Highway, Suite 310, Boca Raton, Florida 33432, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 1877 S. Federal Highway, Suite 310, Boca Raton, Florida 33432. The initial registered agent at that address is Steven M. Scott.

ARTICLE IV

The limited liability company shall be a manager-managed company. The initial manager of the limited liability company is Steven M. Scott.

ARTICLE V

This limited liability company shall commence its existence as of the execution hereof, and shall exist perpetually thereafter unless sooner dissolved.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 1rt day of April, 2009.

Steven M. Scott, Authorized Representative

Fax Audit Number: H09000084963 3

OS APR -9 AM 8: 16
SECRETARS SEE, FLORING

Fax Audit No. H09000084963 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST - The name of the limited liability company is:

5 ORAY BLUFF PLACE, LLC.

SECOND - The name and address of the registered agent and office is:

Steven M. Scott 1877 S. Federal Highway, Suite 310 Boca Raton, Florida 33432

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.

Dated this que day of April, 2009.

Steven M. Soott, Registered Agent

A24383

Fax Audit Number: H09000084963 3