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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ARNSTEIN & LEHR LLP

Account Number : I20060000021

: (561)833-9800

Phone Fax Number

: (561)655-5551

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Ema	£	1	Address:	

FLORIDA/FOREIGN LIMITED LIABILITY CO. J. Milton Dadeland, LLC

Certificate of Status Certified Copy 1 Page Count 02 Estimated Charge \$155.00

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Corporate Filing GauMCLEOP

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J. MILTON DADELAND, 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:

3211 PONCE DE LEON BLVD

SUITE 301

CORAL GABLES FL 33134

3211 PONCE DE LEON BLVD SUITE 301

CORAL GABLES FL 33134

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:

Rex M. Barker

Name

3211 PONCE DE LEON BLVD, SUITE 301

Florida street address (P.O. Box NOT acceptable)

CORAL GABLES,

...

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)

SECRETARY OF STATE

DIVISION OF CORPORATIO

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ARTICLE IV- Manager(s) or Managing Member(s):	
The name and address of each Manager or Managing Member is as	follows:

<u>Title:</u> "MGR" = Man	ager	Name and Address:	
	anaging Member		
MGR		JOSE MILTON	
		3211 PONCE DE LEON BLVD, STE 30	
		CORAL GABLES, FL 33131	-
	······································		···
			 -
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(Use attachmen		tate of filing: OPTIO	- NALJ [†]
ICLE V: Effective	e date, if other than the clated, the date must be	date of filing:	ONAL) [†] days prior
ICLE V: Effective at the last	e date, if other than the disted, the date must be date of filing.)	date of filing: (OPTIC specific and cannot be more than five business	ONAL) [†] days prior
ICLE V: Effective affective date is I 90 days after the	e date, if other than the disted, the date must be date of filing.) IGNATURE:	ne luck	ONAL) [†] days prior
ICLE V: Effective affective date is I 90 days after the	e date, if other than the clisted, the date must be date of filing.) IGNATURE: Signature of a member (In accordance with sect	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution totes an affirmation under the penalties of perjury	- ONAL) [†] days prior
ICLE V: Effective affective date is I 90 days after the	e date, if other than the clisted, the date must be date of filing.) IGNATURE: Signature of a member (In accordance with sect of this document constituted that the facts stated here	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury in are true.) JOSE MILTON	ONAL) [†] days prior
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