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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

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Account Number : I20000000147
Phone : (954) 764-0005
Fax Number : (954) 764-1478

L. SELLERS

NOV 24 2010

EXAMINER

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

River Oaks Villas II, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

RECEIVED
10 NOV 23 AM 11:03
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TALLAHASSEE, FLORIDA

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10 NOV 23 AM 10:51
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**ARTICLES OF ORGANIZATION
OF
RIVER OAKS VILLAS II, LLC**

ARTICLE I - NAME:

The name of the Limited Liability Company is: River Oaks Villas II, LLC.

ARTICLE II - ADDRESS:

The mailing address and the street address of the principal office of the Limited Liability Company is 3200 S Andrews Avenue, #104, Fort Lauderdale, FL 33316.

ARTICLE III - DURATION:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - MANAGEMENT:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Name

Address

Norman Schwartz
Joshua Schwartz

3200 S Andrews Avenue, #104, Fort Lauderdale, FL 33316
3200 S Andrews Avenue, #104, Fort Lauderdale, FL 33316

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be conditioned upon the unanimous consent of the members.

ARTICLE VI - MEMBERS' RIGHTS TO CONTINUE BUSINESS

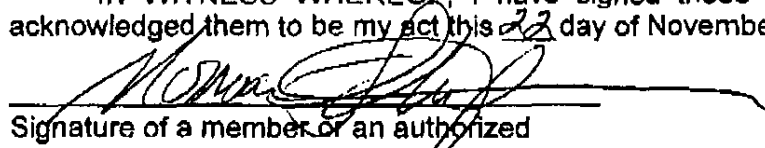
The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be conditioned upon the unanimous consent of the remaining members.

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IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 22 day of November, 2010.


Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

NORMAN SCHWARTZ
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: River Oaks Villas II, LLC.
2. The name and the Florida street address of the registered agent are:

Norman Schwartz
3200 S Andrews Avenue, #104
Fort Lauderdale, FL 33316

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.


Signature - Registered Agent

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