

L 11000141440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

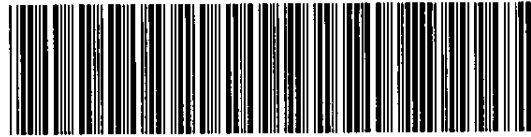
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SUNNY ISLAES T3 901 LLC

Signature \_\_\_\_\_

Requested by: SN

12/16/11

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

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\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

ARTICLES OF ORGANIZATION  
OF  
SUNNY ISLES T3 901 LLC

FILED  
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ARTICLE I  
Name

The name of the limited liability company is Sunny Isles T3 901 LLC (hereinafter called the "Company").

ARTICLE II  
Principal Office

The mailing address and the street address of the principal office of the Company is 2750 N.E. 185<sup>th</sup> Street, Suite 306, Aventura, Florida 33180.

ARTICLE III  
Initial Registered Office and Registered Agent

The street address of the Company's initial registered office in the State of Florida is 2750 N.E. 185<sup>th</sup> Street, Suite 306, City of Aventura, County of Miami-Dade, and the name of its initial registered agent at such office is Louis R. Montello.

The undersigned, being one of the original members of the Company, hereby certifies that the foregoing constitutes the Articles of Organization of Sunny Isles T3 901 LLC.

Executed by the undersigned at Aventura, Florida, this 15<sup>th</sup> day of December, 2011.

SUNNY ISLES T3 901 LLC

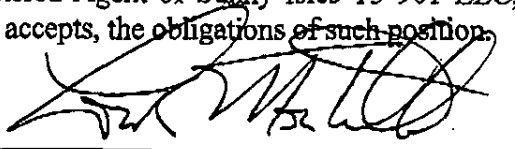
By: 

Louis R. Montello,  
As Authorized Representative

ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

The undersigned, having been named the Registered Agent of Sunny Isles T3 901 LLC, hereby accepts such designation and is familiar with, and accepts, the obligations of such position.

December 15, 2011

  
Louis R. Montello,  
Registered Agent