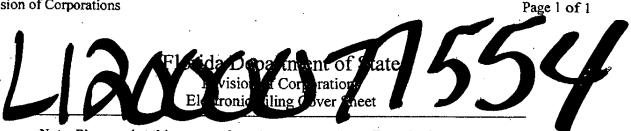
Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: LEVINE & PARTNERS, P.A.

Account Number: 074677001117

: (305)372-1350

Fax Number

: (305)372-1352

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

Email Address:

Madeline@thestylesgroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOUTHEAST RESIDENTIAL RECOVERY FUND V, LLC

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JUN 15 2012

EXAMINER

Electronic Filing Menu

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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608:4115, F.S., this document is being submitted <u>within the required 30 business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

| FIRST | | The name of the limited liability company is: Southeast Residential Recovery Fund V, LLC | | | | | | | | | _ |
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| V | Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The Manager is incorrectly listed as Styles LP, LLC. | | | | | | | | | | |
| | The c | оптесt Ma | nager is | Styles: | LP II, LLC | , 3250 M | lary Stre | et, Suit | e 306, | | |
| | | i, FL 3313 | | | | | , | | | | · · |
| | | | | | | | | | : : . | | |
| | <u>OR</u> | | | | | | | | | ZUKE LLAH | |
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| Dated: | | , | June 13 | 3 | | , 201 | 2 | | | | |
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| | | Signatu | rc of a m | ember o | r authorize | d represer | tative of | a memi | oer ` | | |
| | | <u> </u> | | | aul C. Stei | | | | | | |
| | Typed or printed name of signee | | | | | | | | | | |
| | | | | Filing 1 Certifie | Fee: d Copy: | \$25.0 \$30.00 | 00 (option | al) | | | |

CR2E062 (08/05)

Electronic Articles of Organization For Florida Limited Liability Company

L12000077554 FILED 8:00 AM June 11, 2012 Sec. Of State thampton

Article I

The name of the Limited Liability Company is: SOUTHEAST RESIDENTIAL RECOVERY FUND V, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

3250 MARY STREET SUITE 306 MIAMI, FL. US 33133

The mailing address of the Limited Liability Company is:

3250 MARY STREET SUITE 306 MIAMI, FL. US 33133

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

ALAN W LEVINE 1110 BRICKELL AVENUE SUITE 700 MIAMI, FL. 33131

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.

Registered Agent Signature: ALAN W. LEVINE

Article V

The name and address of managing members/managers are:

Title: MGR STYLES LP, LLC 3250 MARY STREET, SUITE 306 MIAMI, FL. 33133 US L12000077554 FILED 8:00 AM June 11, 2012 Sec. Of State thampton

Signature of member or an authorized representative of a member Electronic Signature: PAUL C. STEINFURTH

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.