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Florida Department of State
Division of Corporations
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((H12000220909 3)))

EFFECTIVE DATE
9-5-2012



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FLORIDA LIMITED LIABILITY CO.
CASA POSITANO L L C

Certificate of Status	1
Certified Copy	0
Page Count	03
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Corporate Filing Menu

Help

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H12000220909

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

EFFECTIVE DATE
9-5-2012**CASA POSITANO LLC**

(Must end with the words "Limited Liability Company, "LLC," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:15761 NW 4 ST
PEMBROKE PINES
FLORIDA 33028**Mailing Address:**15761 NW 4 ST
PEMBROKE PINES
FLORIDA 33028**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:

ERASMO F MARTINEZ

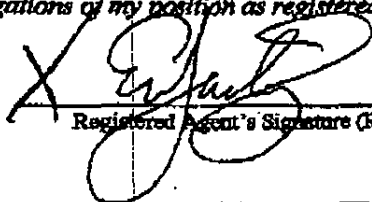
Name

15761 NW 4 STFlorida street address (P.O. Box NOT acceptable)**PEMBROKE PINES FL 33028**

City, State, and Zip

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TALLAHASSEE, FLORIDA

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)

Page 1 of 2

H12000220909

H12000220909

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

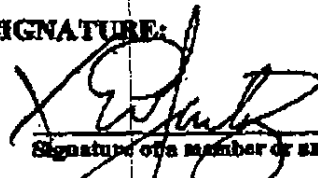
"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRERASMO F MARTINEZ15781 NW 4 STPEMBROKE PINES FL 33028MGRMMARLENE MARTINEZ15781 NW 4 STPEMBROKE PINES FL 33028

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 09/05/2012 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 30 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 606.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

ERASMO F MARTINEZ

Typed or printed name of signer

H12000220909