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ENTITY NAME:

1001-1005 SW 27TH AVE., LLC

CK# 5803 FOR \$ 2720.00

(\$160.00 for this filing)

PLEASE FILE THE ATTACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

____ STAMPED COPY

XXX CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION OF 1001-1005 SW 27th Ave., LLC

<u>ARTICLE I</u> **NAME**

The name of this Limited Liability Company shall be 1001-1005 SW 27th Ave., LLC (the "Company").

ARTICLE II PRINCIPAL PLACE OF BUSINESS

The principal place of business of the Company shall be 752 West Flagler Street, Suite 105, Miami, FL 33130 and such other place or places as the members from time to time may determine. The mailing address of the Company is 752 West Flagler Street, Suite 105, Miami, FL 33130.

ARTICLE III **INITIAL REGISTERED OFFICE AND** REGISTERED AGENT

The initial registered agent of the Company shall be Atrium Registered Agents, Inc. The address of the initial registered agent is 1500 San Remo Avenue, Suite 125, Coral Gables, Florida 33146.

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more member and is, therefore, a member – managed company.

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 7th day of September, 2012, effective upon filing same with the Florida Department of State.

1001-1005 SW 27th Ave., LLC

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BY:

ROBERT A. STAMEN

Authorized Representative

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES. THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING ITS REGISTERED OFFICE AND REGISTERED AGENT IN FLORIDA.

1. The name of the limited liability company is:

1001-1005 SW 27th Ave., LLC

2. The name and address of the registered agent and office is:

> Atrium Registered Agents, Inc. 1500 San Remo Avenue, Suite 125 Coral Gables, Florida 33146

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..

ATRIUM REGISTERED AGENTS, INC.

By: Robert A. Stamen, Vice President

Date: September 7, 2012