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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SHAPIRO & ADAMS, P.A.

Account Number : I19990000101 : (561)691-0059 Phone

Fax Number : (561)691-0066

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

Email Address:

runatango56@vahoo.com

FLORIDA LIMITED LIABILITY CO.

2905 Harbour Oaks, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2905 Harbour Caks, LLC		4.,		
(Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")	1=:	دن	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Lia	bility, Cor	Senty	/ iș:
Principal Office Address:	Mailing Address:	En Es	PHE	
2401 PGA Boulevard	2401 PGA Boulevard		0	
Suite 272	Suite 272	51	9	
Palm Beach Gardens, FL 33410	Palm Beach Gardens, FL 33410	· · · · · · · · · · · · · · · · · · ·		
				

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:

Robert Lee Shapiro, P.A.		
Nam	<u> </u>	
2401 PGA Boulevard, Suite 272		
Florida street ac	idress (P.	O. Box NOT acceptable)
Palm Beach Gardens,	FL	33410
City. S	tate, and	Zip

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)

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Title:	Name and Address:	
'MGR" = Manager	Name and Address.	
"MGRM" = Managing Member		至
MOTOR - Managing Monton		<u>رِي</u> مِنْ الْمُرْدِينَ الْمُرْدِينِ الْمُرْدِينِ الْمُرْدِينِ الْمُر
MGR	Jay Brown	192-1
	3654 Georgia Avenue	-17
	West Paim Beach, FL 33405	0.7
		필술
MGR	Robert Lee Shapiro, P.A.	
	2401 PGA Boulevard, Suite 272	
	Palm Beach Gardens, FL 33410	
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Use attachment if necessary)		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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