## 114000015782

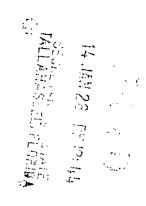
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>-</u>
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies		of Status
Special Instructions to	Filing Officer:	

Office Use Only



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J. Shivers JAN 2.9 2013

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2014

ROSHAN DHARIA 1815 PURDY AVE MIAMI BEACH, FL 33139

SUBJECT: POINTE TIBET INTERMEDIATE III L.L.C.

Ref. Number: W14000001623

We have received your document for POINTE TIBET INTERMEDIATE III L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

·

Letter Number: 514A0000568

Division of Company in a DO DOV 6207 Wellshopped Florida 2001

## **COVER LETTER**

TO:	Registratio Division of	n Section Corporations		
SUBJ	ECT:	Pointe Tibet	Intermediate III L.L.C.	
		Name of Limited I	Liability Company	
The en	closed Article	es of Organization and fee(s) are sub	mitted for filing.	
Please	return all corr	respondence concerning this matter t	o the following:	
			han Dharia	
		Na	me of Person	
			pet Holdings Ltd.	
		FI	m/Company	
		1815	Purdy Ave.	
			Address	
			each, Fl 33139	
		•	ate and Zip Code ntetibetholdings.com	
		E-mail address: (to be used for t	uture annual report notification)	
For fu	ther informati	ion concerning this matter, please ca	II:	
			2741884	-
	Na	me of Person	Area Code & Daytime Telephone Number	
Enclo	sed is a check	k for the following amount:		
<b>4</b> [\$125	00 Fildig Pe	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing F Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	atus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

POINTE-INTER		<u> </u>	
(Must end with the word	ds "Limited Liability Company, "L.L	.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabil	lity Company is:	
Principal Office Address:	Mailing Address:		
MIAMI BEACH, FL 33139	MIAM BEAT	AVE 44, PL 33139	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve another business entity with an active Florida.  The name and the Florida street address of the	e as its own Registered Agent, You maregistration.)		
	Name		
1815 P	URDY AVE		4
Florida street address	s (P.O. Boy NOT acceptable)		-
MIAMI BEACH City	FL 33139		
City	FL <b>3313</b> Zip	<del></del>	
Having been named as registered agent and t the place designated in this certificate, I he capacity. I further agree to comply with the of my duties, and I am familiar with and ac	ereby accept the appointment as regist provisions of all statutes relating to th	tered agent and agree to act in this he proper and complete performance	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	POINTE TIBET ACQUISITIONS LLC 1815 PURDY AUE MAMIBEACH, FL 33139
(Use attachment if necessary)	
EV: Effective date, if other than the fective date is listed, the date must of filing.)	date of tiling: (OPTIONAL) se specific and cannot be more than five business days prior to or 90
LE V: Effective date, if other than the fective date is listed, the date must of filing.)  LE VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90
LE V: Effective date, if other than the fective date is listed, the date must of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of	e specific and cannot be more than five business days prior to or 90 a member or an authorized representative of a member.
E V: Effective date, if other than the fective date is listed, the date must of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of (In accordance with seconstitutes an affirm I am aware that any it	e specific and cannot be more than five business days prior to or 90