

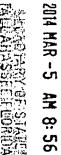
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MAR 10 2014 D. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 6, 2014

RE-SUBMIT PLEASE OBTAIN THE ORIGINAL FILE DATE 54 L

CAPITAL CONNECTION

SUBJECT: AMERICAN APARTMENT GROUP I, LLC Ref. Number: W14000014533

We have received your document for AMERICAN APARTMENT GROUP, LLC and your check(s) totaling \$250.00. 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 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.

Deborah Bruce Regulatory Specialist II

Letter Number: 214A00004911

CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

AMERICAN APAR	TMENT GROUP I,	2	
			RE-SUBMIT
			PLEASE OBTAIN THE ORIGINAL FILE DATE 574
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		Art of Inc. File	
		LTD Partnership File	
		Foreign Corp. File	
		L.C. File	_
		Fictitious Name File	
		Trade/Service Mark	
		Merger File	
		Art. of Amend. File	,
		RA Resignation	
		Dissolution / Withdrawal_	
		Annual Report / Reinstate	ment
		Cert. Copy	<u> </u>
		Photo Copy	
		Certificate of Good Standi	ing
		Certificate of Status	
		Certificate of Fictitious No	ame <u>2 2</u>
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		Officer Search	
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Requested by: SETH	02/07/14	UCC 1 or 3 File	
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Walk-In	Will Pick Up	Courier	-

ARTICLES OF ORGANIZATION

OF

AMERICAN APARTMENT GROUP I, LLC

ARTICLE I

NAME

The name of this Limited Liability Company is American Apartment Group I, LLC

ARTICLE II

ADDRESS

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

601 Brickell Key Drive Suite 700 Miami, FL 33131

ARTICLE III

REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

Scot B. Garrambone 601 Brickell Key Drive 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, an I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

<u>/s/ Scot B. Garrombone</u> Scot B. Garrombone

ARTICLE IV

MANAGER OR AUTHORIZED MEMBER

The name and address of each person authorized to manage and control this Limited Liability Company is as follows:

Authorized Member/Manager

Scot B. Garrombone 601 Brickell Key Drive Suite 700 Miami, FL 33131

ARTICLE V

EFFECTIVE DATE

These Articles are effective as of March 5, 2014.

IN WITNESS WHEREOF, I have hereunto executed these Articles of Organization on this 7th day of March, 2014.

/s/ Scot B. Garrombone
Scot B. Garrombone, Member