# 14000044432

(F	Requestor's Name)
(F	Address)
(F	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	Business Entity Name)
1)	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	to Filing Officer:
	MAR 1 8 2014
	A. LUNT

Office Use Only



900257858269

03/18/14--01001--009 \*\*125.00

CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173	ENUE ,	rmerly CCRS)	<b></b>	. •		
FILING COVER ACCT. #FCA-23	SHEET			2014 H	-	
CONTACT:	RICKY SO	<u>TO</u>		2014 MAR 17 AF	•	
DATE:	03/17/2014	•		HE. FLORID		
REF. #:	9083330			56 0		
CORP. NAME:	540 CASUA	ARINA LLC				
<ul> <li>( ) ARTICLES OF INCORPORATION</li> <li>( ) ANNUAL REPORT</li> <li>( ) FOREIGN QUALIFICATION</li> <li>( ) REINSTATEMENT</li> <li>( ) CERTIFICATE OF CANCELLATION</li> <li>( ) OTHER:</li> </ul>		( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	( ) FICTITIOUS N	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME ( (XX) LIMITED LIABILITY ( ) WITHDRAWAL		
STATE FEES PI	REPAID W	ITH CHECK# <u>70016813</u> FOR	\$ <u>125.00</u>			
AUTHORIZATI	ON FOR A	CCOUNT IF TO BE DEBIT	ED:			
	COST LIMIT: \$					
PLEASE RETU	RN:					
( ) CERTIFIED COP		CERTIFICATE OF GOOD STANDING	(XX) PLAIN STA	MPED COPY		
Examiner's Initial	S					

### ARTICLES OF ORGANIZATION

**OF** 

## 540 CASUARINA LLC

The undersigned Member or Authorized Representative of a Member signs these Articles of Organization and forms a limited liability company (the "Company") under the Florida Limited Liability Company Act (the "Act"), as follows:

### NAME

The name of the Company is: 540 Casuarina LLC.

## MAILING ADDRESS AND STREET ADDRESS

The mailing address and street address of the principal office of the Company is: Attn: Michael A. Silva, Esq., DLA Piper LLP (US), 200 South Biscayne Blvd., Suite 2500, Miami, Florida 33131.

# NAME AND ADDRESS OF MANAGER

The name and address of the sole Manager of the Company is International Real Property Holdings Ltd., c/o J.P. Morgan Trust Company (Bahamas) Limited, 2nd Floor, Bahamas Financial Centre, Shirley and Charlotte Streets, P.O. Box N-4899, Island of New Providence, Commonwealth of The Bahamas.

#### **EXISTENCE**

The Company's existence will commence upon filing.

# INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the initial registered agent and office of the Company are: NRAI Services, Inc., 1200 South Pine Island Road, Plantation, FL 33324.

In accordance with section 605.0203(1)(b), 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.

/s/ Michael A. Silva, Esq.
Michael A. Silva, Esq.
Authorized Representative of Member

# **ACCEPTANCE BY REGISTERED AGENT**

I accept the appointment as Registered Agent of the Company to accept service of process on its behalf at the place designated in these Articles of Organization. I am familiar with, and accept, the obligations of my position as registered agent as provided for in the Act.

Michele Holden, Asst Secretary

NRAI Services, Inc.
1200 South Pine Island Road
Plantation, FL 33324

Dated: March 17, 2014