

197000000366
Certificate Number Only

3/27/97 Magda

Requestor's Name: Joseph Wehby
Address: 8370 W. Flagler #204
City: Miami, FL 33144
State: FL ZIP: 33144 Phone:

VALIDATION ONLY

300002130053--5
-04/01/97--01065--002
****337.50 ****337.50

CORPORATION(S) NAME

Lastana limited company

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Pick Up
- Merger
- Mark
- Other limited liability
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out

RECEIVED
97 MAR 28 AM 10:39
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Florida Department of State
Toll Free: 1-800-432-3028

FILED

97 MAR 28 PM 1:05

AL MAR 28 1997

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

FILED

97 MAR 28 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

LASTANA LIMITED COMPANY

ARTICLE II - Address:

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

**FONTAINEBLEAU EXECUTIVE PLAZA
8370 West Flagler Street, Suite 204
Miami, Florida 33144**

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by a manager or managers and the name and address of such manager who is to serve as manager is:

**JOSEPH M. WEHBY, ESQUIRE
LAW OFFICES OF JOSEPH M. WEHBY, P.A.
FONTAINEBLEAU EXECUTIVE PLAZA
8370 WEST FLAGLER STREET, SUITE 204
MIAMI, FLORIDA 33144**

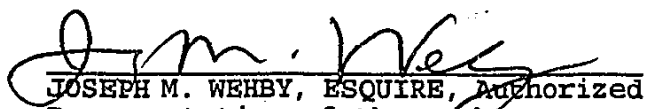
ARTICLE V - Admission of Additional Members:

The members have the right to admit additional members on any terms and conditions to which a majority of the remaining member(s) shall agree from time to time.

ARTICLE VI - Members Rights to Continue Business:

The remaining members of the limited liability company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

Executed this 27~~th~~ day of March, 1997.


JOSEPH M. WEHBY, ESQUIRE, Authorized
Representative of the members.

FILED

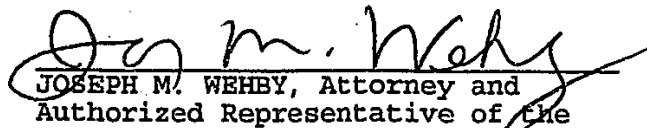
97 MAR 28 PM 1:05

AFFIDAVIT OF MEMBERSHIPS AND CONTRIBUTIONS SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned member or authorized representative of a member of **LASTANA LIMITED COMPANY** deposes and says:

1. The above named limited liability company has at least two members.

- | | |
|---|---------------|
| 2. The total amount of cash contributed by the member(s) is | \$ -0- |
| 3. If any, the agreed value of property other than cash contributed by member(s) is | \$ -0- |
| 4. The amount of cash or property anticipated to be contributed by member(s) is | \$275,000.00 |
| 5. The total amount of 2, 3 and 4 is | \$275,000.00. |


JOSEPH M. WEHBY, Attorney and
Authorized Representative of the
members.

FILED

97 MAR 28 PH 1:05

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

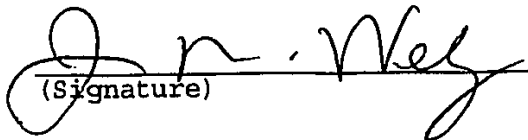
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited company is: **LASTANA LIMITED COMPANY.**
2. The name and address of the registered agent and office is:

**JOSEPH M. WEBBY, ESQUIRE
FONTAINEBLEAU EXECUTIVE PLAZA
8370 WEST FLAGLER STREET, SUITE 204
MIAMI, FLORIDA 33144**

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.


(Signature)


(Date)

FILING FEE: \$35.00 for Designation of Registered Agent