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CONNIE H. SHIVERS, CLA  
HOLLAND & KNIGHT

425-5657

Requestor's Name

315 SOUTH CALHOUN STREET

Address

Tallahassee, Florida- 32301

City/State/Zip

Phone #

224-7000

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

Community Housing Investment Fund, L.C. (74)

(Corporation Name)

(Document #)

(Corporation Name)

(Document #)

(Corporation Name)

(Document #)

(Corporation Name)

(Document #)

☐ Walk-in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

Name Availability	met
Document Examiner	met
Updater	met
Updater Verifier	met
Acknowledgement	met
W. P. Verifier	met

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input checked="" type="checkbox"/>	UCC

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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\*\*\*337.50 \*\*\*337.50

Examiner's Initials

# **COMMUNITY HOUSING INVESTMENT FUND, L.C.**

## **ARTICLES OF ORGANIZATION**

The undersigned, being a duly authorized representative of a member, desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, does hereby adopt the following Articles of Organization:

### **ARTICLE I. NAME**

The name of the limited liability company is COMMUNITY HOUSING INVESTMENT FUND, L.C. (the "Company").

### **ARTICLE II. ADDRESS**

The principal office and mailing address of the Company is:

1460 Brickell Avenue, Suite 309  
Miami, Florida 33131

### **ARTICLE III. DURATION AND CONTINUATION**

The period of the Company's duration shall commence with the filing of these Articles of Organization with the Secretary of State, and shall continue perpetually, unless terminated (i) in accordance with the Company's Regulations, (ii) by the unanimous written agreement of all Members, (iii) by the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member, or (iv) upon the occurrence of any other event which terminates the continued membership of a Member. However, upon any such termination event, the existence and business of the Company may be continued with the consent of a majority of the remaining Members of the Company, or by amendment of these Articles of Organization providing for the continued existence of the Company.

### **ARTICLE IV. PURPOSE**

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

### **ARTICLE V. REGISTERED AGENT AND OFFICE**

The Company designates 701 Brickell Avenue, Suite 3000, Miami, Florida 33131 as the street address of the initial registered office of the Company and names Lynn C. Washington the Company's initial registered agent at that address to accept service of process within this state.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 OCT 16 PM 1:24

## ARTICLE VI. ADDITIONAL MEMBERS

Additional Members may be admitted in the manner set forth in the Regulations of the Company.

## ARTICLE VII. MANAGEMENT

The Company shall be conducted, carried on, and managed by no less than one (1) Manager, who shall be elected annually by the Members of the Company in the manner prescribed by and provided in the Regulations of the Company. Such Manager(s) shall also have the rights and responsibilities described in the Regulations of the Company. The name and address of the initial Manager is as follows:

Greater Miami Neighborhoods, Inc

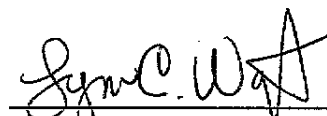
1460 Brickell Avenue  
Suite 309  
Miami, Florida 33131

Such Manager shall serve in such capacity until the first annual meeting of the Members or until its successor is duly elected and qualified.

## ARTICLE VIII. REGULATIONS

The power to adopt, alter, amend, or repeal the Regulations of the Company shall be vested in the Members of the Company.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal this 6th day of October, 1998.




Lynn C. Washington

Duly Authorized Representative of a Member

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### ACCEPTANCE OF REGISTERED AGENT

The undersigned agrees to act as registered agent for the Company named above, to accept service of process at the place designated in these Articles of Organization, and to comply with the provisions of Chapter 608, Florida Statutes, and acknowledge that I am familiar with, and accept, the obligations of such position.

  
\_\_\_\_\_  
Lynn C. Washington

Dated: 10/6/98

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DIVISION OF CORPORATIONS  
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# AFFIDAVIT

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

I, Lynn C. Washington, a duly authorized representative of a member of COMMUNITY HOUSING INVESTMENT FUND, L.C. being first duly sworn, deposes and says:

1. That I am a duly authorized representative of a member of the COMMUNITY HOUSING INVESTMENT FUND, L.C., a Florida limited liability company (the "Company");

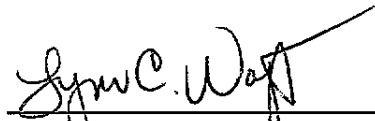
2. That the Company has at least two members;

3. That the members of the Company have contributed \$1,000.00 to the capital of the Company; and

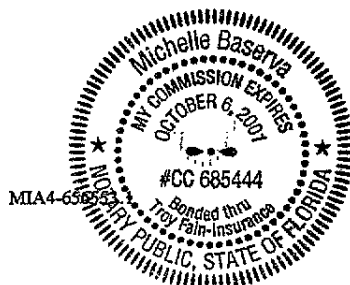
4. That the members of the Company are expected to contribute \$10,000,000.00 of additional capital to the Company.

5. That the agreed value of property other than cash contributed by the member is \$0.

And further affiant sayeth not.

  
\_\_\_\_\_  
Lynn C. Washington  
Duly Authorized Representative of a Member

The foregoing instrument was acknowledged before me this 04 day of October, 1998, by Lynn C. Washington who is personally known to me and who did take an oath.



  
\_\_\_\_\_  
Notary Public--State of Florida

Print Notary Name: Michelle Baserva  
My Commission Number is: CC 68544  
My Commission Expires: 10/06/01

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