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Law Offices of  
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October 19, 1999

Division of Corporations  
State of Florida Secretary of State  
P. O. Box 6327  
Tallahassee, Florida 32314

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-10/21/99--01095--009  
\*\*\*\*155.00 \*\*\*\*155.00

Re: Ocean Paradise, L.L.C.

Dear Sirs:

Enclosed herewith please find Articles of Organization for Florida Limited Liability Company, together with my check in the amount of \$155.00, which represents your fees, broken down as follows:

Filing Fee:	100.00
Designation of Registered Agent:	25.00
Certified Copy:	30.00
<b>TOTAL:</b>	<b>155.00</b>

If you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,



Joel R. Lavender  
JRL:sls

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TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: OCEAN PARADISE, L.L.C.

**ARTICLE II - Address:**

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

c/o Mirtha Camacho, 6233 North University Drive, Tamarac, Florida 33321

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Joel R. Lavender, Esq.  
Name  
507 S.E. 11<sup>th</sup> Court  
Florida street address (P.O. Box **NOT** acceptable)  
Fort Lauderdale, Florida 33316  
City, State, and Zip

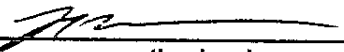
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 as provided for in Chapter 608, F.S.*

  
Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JOEL R. LAVENDER  
Typed or printed name of signee

**FILING FEES:**

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (OPTIONAL)  
\$ 5.00 Certificate of Status (OPTIONAL)

FILED  
OCT 21 AM 10 52  
CLERK OF DISTRICT COURT  
SOUTH FLORIDA