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1 From   
Date 3/2/99  
Sender's Name JENNIE ROSA-ROSA Phone 954-389-8768  
Company  
Address 334 E. RIVERBEND DRIVE  
City Ft. Lauderdale State FL ZIP 33326  
2 Your Internal Billing Reference Information ARTICLES OF INC

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FILED  
99 MAR -3 AM 9:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3559

FILED  
99 MAR -3 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
OF

TWIN OAKS APARTMENTS, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TWIN OAKS APARTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

10800 SW 27 COURT  
DAVIE, FLORIDA 33328

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

100

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

VASILE DAMSE  
10800 SW 27 COURT  
DAVIE, FLORIDA 33328

ARTICLE V - INCORPORATORS

The names and address of the person (s) signing these Articles of Incorporation are as follows:

Name VASILE DAMSE  
Address 10800 SW 27 COURT  
City DAVIE State FLORIDA Zip 33328

Name ADRIANA DAMSE  
Address 10800 SW 27 COURT  
City DAVIE State FLORIDA Zip 33328

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 28 day of FEB, 1999.

Vasile Damse (Seal)  
Adriana Damse (Seal)  
\_\_\_\_\_ (Seal)

STATE OF Florida ) SS  
COUNTY OF Broward )

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

VASILE DAMSE, 10800 SW 27 COURT, DAVIE, FL  
ADRIANA DAMSE, 10800 SW 27 COURT, DAVIE, FL  
known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that \_\_\_\_\_ executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 28 day of FEB, 1999.

Michelle Rosa Gonzalez  
(Notary Public, State of Florida at large)

(Notary Seal)

My Commission expires:



B. Officers:

President: VASILE DAMSE  
Address: 10800 SW 27 COURT  
DAVIE, FLORIDA 33328

Vice President: ADRIANA DAMSE  
Address: 10800 SW 27 COURT  
DAVIE, FLORIDA 33328

Secretary: \_\_\_\_\_  
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

10. Name and Street address of Florida registered agent:

Name: VASILE DAMSE  
Office Address: 10800 SW 27 COURT  
DAVIE, FLORIDA 33328  
City Zip Code

11. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's signature: Vasile Damse

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

13. Vasile Damse  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. VASILE DAMSE, PRESIDENT  
(Name and capacity of person signing application)

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:  
TWIN OAKS APARTMENTS, INC.
2. The name and address of the registered agent and office is:  
VASILE DAMSE - TWIN OAKS APARTMENTS, INC.  
(Name)  
10800 SW 27 COURT  
(P.O. Box NOT acceptable)  
DAVIE, FLORIDA 33328  
(City/State/Zip)

Signature

Vasile Damse

Title PRESIDENT

Date 2/28/99

Having been named as registered agent and to accept service of process for the above stated corporation 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 performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature

Vasile Damse

Date 2/28/99

REGISTERED AGENT FILING FEE: \$35.00

**FILED**  
99 MAR -3 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA