

L05000049758

Florida Department of State
Division of Corporations
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RECEIVED
05 MAY 18 PM 2:58
DIVISION OF CORPORATION

To: Division of Corporations
Fax Number : (850)205-0383
From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

05 MAY 18 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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W05/19/05

LIMITED LIABILITY COMPANY

samara properties llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

③

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SAMARA PROPERTIES LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8201 CORAL WAY
MIAMI, FL. 33155

SAME

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

ELIZABETH AYUB

Name

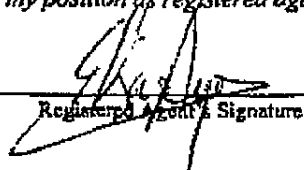
8201 CORAL WAY

Florida street address (P.O. Box NOT acceptable)

MIAMI, FL 33155

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

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

GAMAL NAIM AYOUB
8201 CORAL WAY
MIAMI, FL. 33155

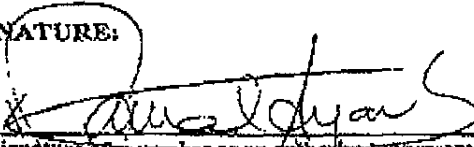
MGR

ELIZABETH AYOUB
8201 CORAL WAY
MIAMI, FL. 33155

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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

(In accordance with section 605.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

GAMAL NAIM AYOUB
Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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