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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : STILES CORPORATION
Account Number : 120020000020
Phone : (954)627-9156
Fax Number : (954)627-9037

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[Signature]*

FLORIDA/FOREIGN LIMITED LIABILITY CO.

STILES GAINESVILLE GP, LLC

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**ARTICLES OF ORGANIZATION
OF
STILES GAINESVILLE GP, LLC**

Pursuant to section 608.407, Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

ARTICLE I - NAME

The name of the Limited Liability Company is **STILES GAINESVILLE GP, LLC.**

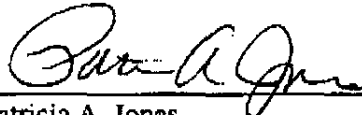
ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is c/o Stiles Corporation, 300 S.E. 2nd Street, Ft. Lauderdale, Florida 33301
Attn: Patricia Jones.

ARTICLE III - DURATION

The period of duration for the Limited Liability Company is perpetual.

IN WITNESS WHEREOF, the undersigned authorized representative hereunto set her hand and seal this 11th day of September, 2006.



Patricia A. Jones
Authorized Representative

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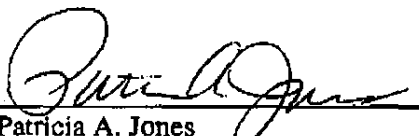
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**CERTIFICATE DESIGNATING REGISTERED AGENT
AND REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

STILES GAINESVILLE GP, LLC, desiring to organize as a limited liability company under the laws of the State of Florida, has designated c/o Stiles Corporation, 300 S.E. 2nd Street, Ft. Lauderdale, Florida 33301, as its initial Registered Office and has named Patricia Jones, located at said address as its initial Registered Agent.

By: 
Patricia A. Jones
Authorized Representative

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office; the undersigned hereby accepts said appointment and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.

By: 
Patricia A. Jones
Registered Agent

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