

Florida Department of State

Division of Corporations

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

From:
Account Name : SHUMAKER, LOOP & KENDRICK LLP
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

BV PARCEL 5B1, LLC

Certificate of Status	1
Certified Copy	0
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**ARTICLES OF ORGANIZATION
BV PARCEL 5B1, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is BV PARCEL 5B1, LLC.

ARTICLE II - Address:

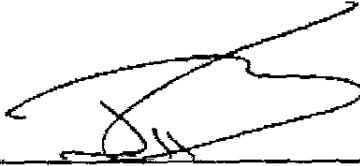
The street and mailing address of the principal office of the Limited Liability Company is:

5700 Saddlebrook Way
Room 222
Wesley Chapel, Florida 33543

ARTICLE III - Management:

The Limited Liability Company is to be managed by a manager or managers. The initial manager shall be RJW Management, LLC.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 14th day of November, 2006.



Signature of 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.)

J. Todd Timmerman
Typed or printed name of signee

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CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
COUNTY OF WESLEY CHAPEL, FLORIDA

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is **BV PARCEL 5B1, LLC.**
- 2. The name and the Florida street address of the registered agent are:

J. Todd Timmerman
 Shumaker, Loop & Kendrick, LLP
 101 East Kennedy Blvd.
 Suite 2800
 Tampa, Florida 33602

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.



Signature

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