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Fax - RUDEN

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Florida Department of State  
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Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.

Account Number : 076077000521

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DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Lowe GSA, LLC**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
OF  
LOWE GSA, LLC  
a Florida Limited Liability Company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is LOWE GSA, LLC (the "Company").
2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing address for the Company is: 890 South Dixie Highway, Coral Gables, Florida, 33146.
3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: c/o Sheldon Lowe, 890 South Dixie Highway, Coral Gables, Florida, 33146.

The undersigned has executed these Articles of Organization on the 1 day of

June, 2006.

By: Sheldon Lowe  
Sheldon Lowe, Authorized Representative

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

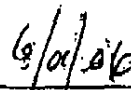
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE  
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

1. The name of the limited liability company is: **LOWE GSA, LLC.**
2. The name and address of the registered agent and office is:

Sheldon Lowe  
890 South Dixie Highway  
Coral Gables, Florida, 33146

*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 its 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.*

  
Sheldon Lowe, Registered Agent

  
Date

MIA:320738:1

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