Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036 : (407)843-4600 Phone

Fax Number : (407)843-4444

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FLORIDA LIMITED LIABILITY CO. MB HILLPOINTE, LLC

| Certificate of Status | 0 | | | |
|-----------------------|---------|--|--|--|
| Certified Copy | 1 | | | |
| Page Count | 01 | | | |
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ARTICLES OF ORGANIZATION SECRETARY OF STATE TALLAHASSEE, FL. MB HILLPOINTE, LLC

ARTICLE I - NAME

The name of this limited liability company is MB HILLPOINTE, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 807 W. Morse Boulevard, Suite 101, Winter Park, Florida 32789.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 807 W. Morse Boulevard, Suite 101, Winter Park, Florida 32789, and the name of the initial registered agent of the Company at that address is R. Gabriel Miller.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial managers of the Company are R. Gabriel Miller and Chance Brannen.

R. Gabriel Miller, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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 605, Florida Statutes.

R. Gabriel Miller