

CT CORPORATION SYSTEM

CORPORATION(S) NAME

L010000002018

Inland Southeast West Oaks, L.L.C.

900002656819
-02/08/01--01008--003
****160.00 ****160.00

- | | | |
|--|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| <input checked="" type="checkbox"/> Articles | <input type="checkbox"/> Fictitious Name | <input checked="" type="checkbox"/> UCC |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input checked="" type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 FEB -7 PM 4:15

APPROVED
AND
FILED

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

2/7/01

Order#: 3547453

Ref#: _____

Amount: \$ _____

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

01 FEB -7 PM 3:41

RECEIVED

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

JME

2-7-01

**ARTICLES OF ORGANIZATION
FOR
INLAND SOUTHEAST WEST OAKS, L.L.C.**

ARTICLE I - Name

The name of the Limited Liability Company is INLAND SOUTHEAST WEST OAKS, L.L.C. (the "Company").

ARTICLE II - Address

The mailing address and street address of the principal office of the Company is: 2901 Butterfield Road, Oak Brook, Illinois 60523.

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

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

**CT Corporation System
c/o CT Corporation System, 1200 South Pine Island Road
Plantation, FL 33324**

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.

CT CORPORATION SYSTEM

**CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY**

By: Connie Bryan
Registered Agent's Signature

ARTICLE IV - Management

The Limited Liability Company is to be managed by its sole member:

Inland Retail Real Estate Limited Partnership
2901 Butterfield Road
Oak Brook, IL 60523


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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

INLAND RETAIL REAL ESTATE LIMITED PARTNERSHIP

an Illinois limited partnership

By: Inland Retail Real Estate Trust, Inc., a Maryland corporation

Its: General Partner

By: 
Scott W. Wilton, its Secretary

(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.)

APPROVE,
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA