

FROM HILL, WARD, HENDERSON, P.A.

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Page 1 of 2

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 922-4003

From:

Account Name : HILL, WARD & HENDERSON, P.A. II
Account Number : 072100000520
Phone : (813) 221-3900
Fax Number : (813) 221-2900

AL

LIMITED LIABILITY COMPANY

Two Amigos Realty Partners I, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAR -5 PM 4:15

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TALLAHASSEE, FLORIDA

01 MAR -5 PM 3:28

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ARTICLES OF ORGANIZATION

OF

TWO AMIGOS REALTY PARTNERS I, LLC

The undersigned executes these Articles of Organization of TWO AMIGOS REALTY PARTNERS I, LLC to form a limited liability company pursuant to the Florida Limited Liability Company Act:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I. NAME

The name of the limited liability company is:
TWO AMIGOS REALTY PARTNERS I, LLC

ARTICLE II. ADDRESS

The mailing and street address of the principal office of the limited liability company is
601 North Ashely Drive, Suite 1200, Tampa, Florida 33602.

ARTICLE III. REGISTERED AGENT AND OFFICE

The street address of the initial registered office of the limited liability company is 101 East Kennedy Boulevard, Suite 3700, Tampa, Florida 33602, and the name of the Company's initial registered agent at that address is Thomas W. Black.

Having been named 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.

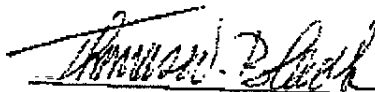


Thomas W. Black

ARTICLE IV. MANAGEMENT OF COMPANY

The business of the limited liability company will be managed by managers

EXECUTED: March 5, 2001



Thomas W. Black

Authorized Representative of Member

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