

FROM HILL, WARD, HENDERSON, P.A.

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Florida Department of State

Division of Corporations

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To:

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

From:

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

LIMITED LIABILITY COMPANY

5001 Cypress, LLC

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

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**ARTICLES OF ORGANIZATION
OF
5001 CYPRESS, LLC**

**ARTICLE I
Name**

The name of the Limited Liability Company is: 5001 CYPRESS, LLC.

**ARTICLE II
Address**

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

777 South Harbour Island Boulevard
Suite 900
Tampa, Florida 33602-5701

**ARTICLE III
Management**

The Limited Liability Company is to be managed by those Managers elected pursuant to the terms of the company's operating agreement.

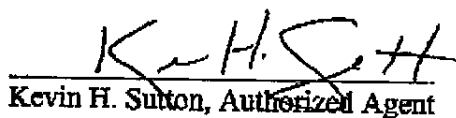
**ARTICLE IV
Registered Office/Registered Agent**

The name of the Limited Liability Company's registered agent is Kevin H. Sutton, and his address is 101 East Kennedy Boulevard, Suite 3700, Tampa, Florida 33602.

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.


Kevin H. Sutton

Executed: July 27, 2001


Kevin H. Sutton, Authorized Agent

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