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(Requestor's Name)

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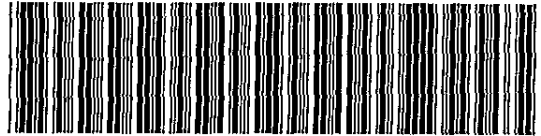
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



January 24, 2003

Florida Department of State
Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

RE: Highlands Pointe, LLC

Enclosed are an original and one (1) duplicate original of the Articles of Organization for the above referenced limited liability company, as well as a check in the amount of \$160.00 for the following fees:

Filing Fee	\$100.00
Designation of Registered Agent	25.00
Certified Copy	30.00
Certificate of Status	<u>5.00</u>
	\$160.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I have enclosed a Federal Express airbill for return of the copy and certificate to me.

Thank you for your consideration.

Sincerely,

A handwritten signature in cursive script that reads 'Renée Sandell'.

Renée Sandell
Vice President
Florida Region

REGENCY DEVELOPMENT ASSOCIATES, INC. • REGENCY CONSTRUCTORS, INC.

1103 West Hibiscus Blvd, Suite 408 • Melbourne, Florida 32901

321/723-9200 • fax: 321/723-7781

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With offices throughout the Southeast

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Highlands Pointe, LLC

ARTICLE II - Address:


The mailing address and street address of the principal office of the Limited Liability Company is:
c/o Renée Sandell, 1103 W. Hibiscus Boulevard, Suite 408, Melbourne, FL 32901

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

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

Renée Sandell
Name
1103 West Hibiscus Boulevard, Suite 408
Florida street address (P.O. Box **NOT** acceptable)
Melbourne FL 32901
City, State, and Zip

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.


Registered Agent's Signature

(An additional article must be added if an effective date is requested)


Signature of a member or an authorized representative of a member.

(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.)

Renée Sandell
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA