DIVISION OF CORPORATIONS BROAD AND CASSEL 001090Z

Florida Department of State

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To:

Division of Corporations

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From:

: BROAD AND CASSEL (BOCA RATON) Account Name

Account Number : 076376001555 Phone : (561)483-7000

Fax Number : (561)218-8960

LIMITED LIABILITY COMPANY

BAINBRIDGE MANAGEMENT JACKSONVILLE LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

ON OF CORPORATION

2.

Fax Audit Number: H03000191927 0

ARTICLES OF ORGANIZATION

OF

BAINBRIDGE MANAGEMENT JACKSONVILLE LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company shall be: BAINBRIDGE MANAGEMENT JACKSONVILLE LLC.

ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be 12765 West Forest Hill Boulevard, Suite 1307, Wellington, Florida 33414, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is David J. Powers, P.A., 7777 Glades Road, Suite 300, Boca Raton, Florida 33434. The initial registered agent at that address is David J. Powers, P.A.

ARTICLE IV

This limited liability company shall commence its existence as of the executionhereof on May 12, 2003, and shall exist perpetually thereafter unless sooner dissolved.

ARTICLE V

This limited liability company shall be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 12th day of May, 2003.

David J. Powers, P.A., a Florida professional service corporation, Authorized Representative

David J. Powers President

By:

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST — The name of the limited liability company is Bainbridge Management Jacksonville LLC.

SECOND -- The name and address of the registered agent and office is:

David J. Powers, P.A. 7777 Glades Road Suite 300 Boca Raton, Florida 33434

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.

Dated this 12th day of May, 2003.

David J. Powers, P.A., a Florida professional service corporation, Registered Agent

ву: __

David J./Powers, President

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