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LAW OFFICES OF

HILL, WARD & HENDERSON

PROFESSIONAL ASSOCIATION

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June 19, 2003

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Via FEDERAL EXPRESS

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Destin-Poinciana, LLC

St. Petersburg-Ninth, LLC Ft. Lauderdale-Broward, LLC Our File No. 4622-000017

Dear Sir or Madam:

Enclosed please find the Articles of Organization for each of the above referenced entities along with three (3) checks (nos. 453082, 453083, 453084) from Southern Farm Bureau Life Insurance Company as payment for the filing fees. I ask that you process these filings upon receipt and return the enclosed copy of this transmittal letter stamped "as filed" for our records. I have enclosed a self-addressed envelope for your convenience.

If you have any questions or comments regarding the above, please feel free to contact me at (813) 222-3185. Thank you for your assistance.

Very truly yours,

Rebecca McNeely

Paralegal

Encs. (6)

cc:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

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The name of the Limited Liability Company is:

St. Petersburg-Ninth, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: Post Office Box 78, Jackson, MS 39205
1401 Livingston Lane, Jackson, MS 39213

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

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

The name and the Hora	a sheet address of the f	egistered agent	arc.	-
Jonathan P. Jennewein				
3700 Bank of America Plaza				
101 East Kennedy Boulevard				
Florida street address (P.O. Box NOT acceptable)				150 2 2
Т.	ampa	FL 3	3602	1. E. S. S.
	City, S	State, and Zip		OF T
Having been named as r liability company at the pregistered agent and agr statutes relating to the pracept the obligations of	place designated in this ree to act in this capacity roper and complete perf my position as register	certificate, I he y. I further agre formance of my	reby accept the ap ee to comply with a duties, and I am fo vided for in Chapt	ppointment as the provisions of all amiliar with and
	Registered .	Agent's Signature		
(An add	ditional article must be a	added if an effe	ctive date is reque	ested)
Sign	ature of a member of an a VICE PRE	httorized represe SIDENT	entative of a membe	r.

Typed or printed name of signee

(In accordance **REALTY ONVESTMENTS** ida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Southern Farm Bureau Life Insurance Company

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

By: Philip Hogue, Vice President

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)