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From: Account Name : WHITE & CASE  
Account Number : 075410002143  
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LIMITED LIABILITY COMPANY

RAPHAEL IV, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
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ATTN: m. WAGONER

Handwritten initials and number: Wagoner 12904

ARTICLES OF ORGANIZATION  
OF  
RAPHAEL IV, LLC

Pursuant to section 608.407, Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

ARTICLE I - NAME

The name of the Limited Liability Company is RAPHAEL IV, LLC.

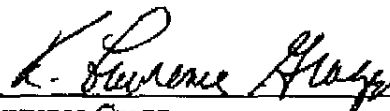
ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is c/o Gulf Bay Investments, 4001 Tamiami Trail North, Suite 350, Naples, FL 33940.

ARTICLE III - DURATION

The period of duration for the Limited Liability Company is perpetual.

IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set his hand and seal this 22<sup>nd</sup> day of January, 2004.



K. Lawrence Gragg  
Authorized Representative

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**CERTIFICATE DESIGNATING REGISTERED AGENT  
AND REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

RAPHAEL IV, LLC, desiring to organize as a limited liability company under the laws of the State of Florida, has designated c/o Woodward, Pires & Lombardo, P.A. 3200 Tamiami Trail North, Suite 200, Naples, Florida 33410, as its initial Registered Office and has named Mark J. Woodward, located at said address as its initial Registered Agent

By: *K. Lawrence Gragg*  
K. Lawrence Gragg  
Authorized Representative

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office; the undersigned hereby accepts said appointment and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.

By: *[Signature]*  
Mark J. Woodward  
Registered Agent

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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