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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

FILED



February 18, 2004

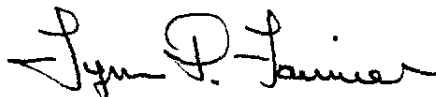
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

Please accept the enclosed papers as the formation documents for City Housing of Jacksonville I, LLC. I have enclosed the filing fees including a fee for a certified copy of the organization documents. The mailing address for City Housing of Jacksonville I, LLC is 10201 Centurion Pkwy, Jacksonville, FL 32256. I can be reached at 904-279-9271 for additional questions.

Thank you for your assistance.

Sincerely,

  
Lynn D. Fournier

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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: City Housing of Jacksonville I, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lynn D. Fournier, President  
(Name of Person)

City Development Company, LLC  
(Firm/Company)

10201 Centurion Pkwy Suite 600  
(Address)

Jacksonville, FL 32080  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lynn D. Fournier at (904) 279-9271  
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

City Housing of Jacksonville I, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

10201 Centurion Pkwy, Suite 600  
Jacksonville, FL 32256  
c/o City Development  
Company, LLC

**Mailing Address:**

10201 Centurion Pkwy Suite 600  
Jacksonville, FL 32256  
c/o City Development Company,  
LLC

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

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

Lynn D. Fournier  
Name

83 Comares # 6B  
Florida street address (P.O. Box **NOT** acceptable)

St. Augustine FLORIDA 32080  
City, State, and Zip

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TALLAHASSEE, FLORIDA

*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, Florida Statutes..*

Lynn D. Fournier  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Lynn D. Fournier  
President City Development Company, LLC  
10201 Centurian Way Suite 600  
Jacksonville, FL 32256

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

Lynn D. Fournier

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.)

Lynn D. Fournier

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

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