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From:

Account Name : PROSKAUER ROSE LLP
Account Number : 074673001063
Phone : (561) 995-4751
Fax Number : (561) 241-7145

LIMITED LIABILITY COMPANY

1600 W. Commercial Blvd., L.L.C.

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TALLAHASSEE, FLORIDA**

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

ARTICLE I - Name:

The name of the Limited Liability Company is: 1600 W. Commercial Blvd., L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: c/o Stuart T. Kapp, Esq., 2255 Glades Road, Suite 340W, Boca Raton, FL 33431

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

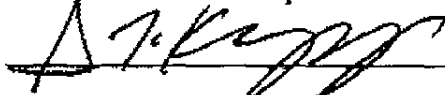
The name and the Florida street address of the registered agent are:

Stuart T. Kapp, Esq.
2255 Glades Road, Suite 340W
Boca Raton, FL 33431

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

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



(In accordance with section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Stuart T. Kapp, Esq.
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)