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To:

**Division of Corporations
Fax Number : (850) 205-0383**

From:

**Account Name : CORPORATE CLEARANCE CORP.
Account Number : I20000000011
Phone : (718) 888-7773
Fax Number : (718) 888-8559**

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LIMITED LIABILITY COMPANY

Duplex TA2, LLC

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY
OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Duplex TA2, LLC

FIRST: The name of the Limited Liability Company is:

Duplex TA2, LLC

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

5151 Collins Avenue, Suite 1424, Miami Beach, FL 33140

THIRD: The name and the Florida street address of the registered agent is:

Rodney Hakimian
5151 Collins Avenue, Suite 1424, Miami Beach, FL 33140

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.



Rodney Hakimian, Registered agent

FOURTH: The Limited Liability Company is NOT a manager-managed company.

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.



Rodney Hakimian, Member

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