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To:

Division of Corporations
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From:

Account Name : HILL, WARD & HENDERSON, P.A. II
Account Number : 072100000520
Phone : (813) 221-3900
Fax Number : (813) 221-2900

LIMITED LIABILITY COMPANY

Hogan Loganville, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
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**ARTICLES OF ORGANIZATION
OF
HOGAN LOGANVILLE, LLC**

The undersigned executes these Articles of Organization of HOGAN LOGANVILLE, LLC to form a limited liability company pursuant to the Florida Limited Liability Company Act:

ARTICLE I. NAME

The name of the limited liability company is: Hogan Loganville, LLC

ARTICLE II. ADDRESS

The mailing and street address of the principal office of the limited liability company is 101 East Kennedy Boulevard, Suite 4000, Tampa, Florida 33602.


ARTICLE III. REGISTERED AGENT AND OFFICE

The street address of the initial registered office of the limited liability company is 101 East Kennedy Boulevard, Suite 4000, Tampa, Florida 33602, and the name of the Company's initial registered agent at that address is Raymond E. Mills.


Having been named 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.

ARTICLE IV. MANAGEMENT OF COMPANY

The the limited liability company is to be a manager-managed company.


Raymond E. Mills

EXECUTED: November 5, 2004


Raymond E. Mills
Authorized Representative of Member

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