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ACCOUNT NO. : 072100000032

REFERENCE: 220009 4804992

AUTHORIZATION :

COST LIMIT: \$ PREPAID WITH CK# 36696 (\$125)

ORDER DATE: February 23, 2005

ORDER TIME : 10:22 AM

ORDER NO. : 220009-005

CUSTOMER NO: 4804992

CUSTOMER: Amy K. Bridwell, Esq.

Scoggins & Goodman, P.C.

245 Peachtree Center Ave. N.E.

2800 Marquis One Tower Atlanta, GA 30303

DOMESTIC FILING

NAME: CAPE CORAL VEST, LLC

EFFECTIVE DATE:

XX	ARTICLI CERTIFI ARTICLI	CATE	OFI	TIMIT	ED I	PARTNE	RSHI	ſP.,	
PLEASE	RETURN	THE	FOLLO	WING	AS	PROOF	OF	FILING:	
CERTIFIED COPY XXX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING									

CONTACT PERSON: Carina L. Dunlap - EXT. 2951
EXAMINER'S INITIALS:

OS FEB 23 PM 3: 39
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Cape Coral Vest, LLC

ARTICLE II - Address:

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

6111 Peachtree Dunwoody Road, Suite B-102 Atlanta, Georgia 30328-4577

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signatur

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

Corporations Services Company 1201 Hays Street Tallahassee, Florida 32301

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 provision 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.

> Jeanine Reynolds Registered Agent's Signature as its agent

ARTICLE IV - Management (Check box if applicable.)

☑ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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.)

Stanley R. Bullington

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)