2005 AUG 19 A 10: 20

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: (850) 205-0383 Fax Number

From:

: NELSON - HESSE Account Name Account Number : I19990000187 : (941)366-7550 Phone Fax Number : (941)955-3708

LIMITED LIABILITY COMPANY

1875/1877 SOUTHPOINTE DRIVE, LLC

Certificate of Status	
Certifical Copy	
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION OF 1875/1877 SOUTHPOINTE DRIVE, LLC 2005 AUG 19 A 10: 20 A FLORIDA LIMITED LIABILITY COMPANY SECRE PARTY OF STATE TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I - Name:

The name of the Limited Liability Company is: 1875/1877 SOUTHPOINTE DRIVE, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: C/O Bankers Trust Co., 665 Locust Street, Des Moines, Iowa 50304

ARTICLE III - Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent is: F. Steven Herb, whose address is 2070 Ringling Blvd., Sarasota, Florida 37237

ARTICLE IV - Manger and Member Information

The Limited Liability Company shall be a MEMBER MANAGED Company. The name and address for each member is as follows:

Name and Address

Title

 Katherine C. Meredith Trust dated September 2, 1975
 Bankers Trust Co.
 665 Locust Street
 Des Moines, Iowa 50304

Member Manager

ARTICLE V -- Operating Agreement Shall be in Writing:

Any Operating Agreement (as defined in Section 608.402(24) of the Act), relating to this Limited Liability Company must be in writing and signed by all of the members.

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FILED

KATHERINE C. MEREDITH TRUST DATED SEPTEMBER 2, 1975

By: Katherine C. Meredith, as Co-Trustee

(In accordance with section 608.408(3), Florida Statutes, the execution of this certificate constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

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 under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Signature of Registered Agent

F. Steven Herb

Filing Fee: \$100.00 for Articles of Organization

\$25.00 for Designation of Registered Agent