

Sep-21-2005 12:18pm

RUDE, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.

998 P.O. Box 998 E

U05000093221

Florida Department of State
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

TW Communities, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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**ARTICLES OF ORGANIZATION
OF
TW COMMUNITIES, LLC
a Florida Limited Liability Company**

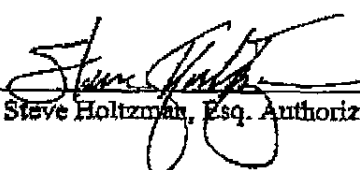
The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida does set forth the following:

1. NAME. The name of the Limited Liability Company is TW COMMUNITIES, LLC (the "Company").

2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing address for the Company is: 401 South Albany Avenue, Tampa, Florida 33606.

3. REGISTERED AGENT. The name and address of the initial registered agent on the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Steve Holtzman, Esq., 401 East Jackson Street, Tampa, Florida 33602.

The undersigned has executed these Articles of Organization on the 21st day of September, 2005.

By: 
Steve Holtzman, Esq. Authorized Representative

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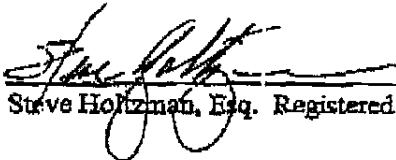
**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

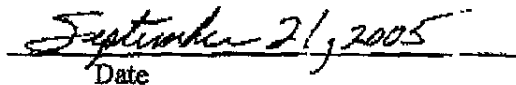
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: TW COMMUNITIES, LLC.
2. The name and address of the registered agent and office is:

Steve Holtzman, Esq.
401 East Jackson Street
Tampa, Florida 33602

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 its 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.


Steve Holtzman, Esq. Registered Agent


Date