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Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

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Fax Number : (850) 205-0383

From:

Angelica M. Chiron

Account Name : AKERMAN, SENTERFITT & BIDSON, P.A.
Account Number : 075471001363
Phone : (305) 374-5600
Fax Number : (305) 374-5095

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

MASMAR XVI - BOA, LLC

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FAX AUDIT No. H05000238488

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**ARTICLES OF ORGANIZATION
FOR
MASMAR XVI - BOA, LLC**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is: Masmur XVI - Boa, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 5835 Blue Lagoon Drive, 4th Floor, Miami, FL 33126.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Masoud Shojaae
5835 Blue Lagoon Drive
4th Floor
Miami, FL 33126

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.

Masoud Shojaae
Registered Agent's Signature

Signed and dated this 7th day of October, 2005.

Masoud Shojaae
Authorized representative of a member

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