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From: *Angelica M. Chism*
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Account Number : 075471001363
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LIMITED LIABILITY COMPANY

MASMAR XVII - BOA, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT No. H05000238490

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

ARTICLE I - Name:

The name of the Limited Liability Company is: Masmarr XVII - 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 Shojaee

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 Shojaee

Registered Agent's Signature

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

Masoud Shojaee

Authorized representative of a member

FAX AUDIT No. H05000238490