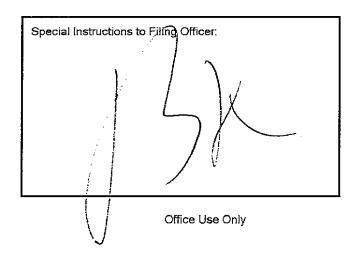
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(Reque	stor's Name)	
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(Address)		
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PICK-UP	WAIT	MAIL
Rusine	es Entity Name)	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of	Status
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ACCOUNT NO.: 072100000032	_	
REFERENCE: 792585 4320758	Ž.	
AUTHORIZATION: Spelle le na 1972	70	
COST LIMIT: \$ 155.00	ب خ بې	
ORDER DATE : January 4, 2006	気が	
ORDER TIME : 11:40 AM		
ORDER NO. : 792585-005		
CUSTOMER NO: 4320758		
DOMESTIC FILING		
NAME: CORPORATE AMERICA REALTY		
ADVISORS OF FLORIDA, L.L.C.		
EFFECTIVE DATE:		
ARTICLES OF INCORPORATION		
CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
XX CERTIFIED COPY PLAIN STAMPED COPY		
CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Kathy Drake - EXT. 2959		
EXAMINER'S INITIALS:	_	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

THE PASSE FLORIDA

ARTICLE I - Name:		
The name of the Limited Liability Company is:	The state of the s	
Corporate America Realty Advisors of Florida, L.L.C.		
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is	
Principal Office Address:	Mailing Address:	
3500 East Fletcher Avenue, Suite 105	3500 East Fletcher Avenue, Suite 105	
Tampa, Florida 33613	Tampa, Florida 33613	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re		
Corporation Service Company Name		
1201 Hays Street		
Florida street address (P.O.	Box NOT acceptable)	
Tallahassee	FLORIDA 32301	
City, State, an	d Zip	

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, Florida Statutes..

Cynthia L. Harris as its agent

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Thomas W. Tift, III
	Fifteen Piedmont Center, Suite 600 Atlanta, Georgia 30305
(Use attachment if necessary)	
NOTE: An additional article must b	oe added if an effective date is requested.
REQUIRED SIGNATURE:	4
- Chore	
Signature of a member or an	authorized representative of a member.
(In accordance with section 60 of this document constitutes are that the facts stated herein are	18.408(3), Florida Statutes, the execution a affirmation under the penalties of perjury true.)
James H. Kaminer, Jr.	<u></u>
Typed or p	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)