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Division of Corporations

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From:

Account Name : HUNTON & WILLIAMS Account Number : 1200000000236 Pnone : (305)810-2542 Fax Number : (305)810-2460

ORIDA/FOREIGN LIMITED LIABILITY CO.

STORSAFE HAMMOCKS MANAGER LLC

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ARTICLES OF ORGANIZATION

OF

STORSAFE HAMMOCKS MANAGER LLC

These Articles of Organization are made for the purpose of organizing a Florida limited liability company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608)

ARTICLE 1 - NAME

The name of the limited liability company is STORSAFE HAMMOCKS MANAGER LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 444 Brickell Avenue, Suite 900, Miami, Florida 33131.

ARTICLE III - DURATION

The period of duration of the Company shall be perpetual.

ARTICLE IV - PURPOSES

The Company is organized for the purpose of transacting all lawful activities and businesses.

ARTICLE V REGISTERED AGENT: REGISTERED ADDRESS

The name of the initial registered agent of the Company is Stuart K. Hoffman, Esq. The Florida street address of the initial registered agent of the Company is Stuart K. Hoffman, Esq. c/o Hunton & Williams LLP, 1111 Brickell Avenue, Suite 2500, Miami, Florida 33131.

ARTICLE VI MANAGEMENT

The Company is to be member managed in accordance with the terms and conditions of the Company's Operating Agreement.

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ARTICLE VII ADMISSION OF ADDITIONAL MEMBERS

Additional members to the Company may be admitted only in accordance with the terms and conditions of the Company's Operating Agreement, as amended from time-to-time.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand this 33**/
day of March, 2006.

Stuar K Hoffman

Duty Authorized Representative of

Member

OP TAK 23 AFTIO: OF SECRETAL OF STATE



CERTIFICATE DESIGNATING THE ADDRESS AND AN AGENT UPON WHOM PROCESS MAY BE SERVED

WIINESSEIH:

That STORSAFE HAMMOCKS MANAGER LLC desiring to organize under the laws of the State of Florida, has named Stuart K. Hoffman, Esq., located at Hunton & Williams LLP, 1111 Brickell Avenue, Suite 2500, Miami, Florida 33131, as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the above-stated corporation, at the place designated in this certificate. I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I/am familiar with, and accept the duties and obligations of a registered agent outlined in Section 608.415, Florida Statutes.

Dated this 23 day of March, 2006.

Name: Stuart K. Hoffman

Registered Agent

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SECRETARIO STATE

APPROVED FILED