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Florida Department of State

Division of Corporations

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

BBL Equinox at Tradition, LLC

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CARLTON FIELDS
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Date:	April 11, 2006	**Phone Number**	**Fax Number**
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From:	Cristin Conley	(813) 223-7000	(813) 229-4133

Client/Matter No.: 95001/76220 **Employee No.: 296**

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Message: ATTACHED ARE ARTICLES OF ORGANIZATION FOR BBL EQUINOX AT TRADITION, LLC. PLEASE RETURN A CERTIFIED COPY AND A CERTIFICATE OF STATUS FOR THE DOCUMENT TO ME VIA FACSIMILE. THANK YOU.

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TALLAHASSEE, FLORIDA

☐ *Original to follow Via Regular Mail* ☑ *Original will Not be Sent* ☐ *Original will follow via Overnight Courier*

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TELECOPIER OPERATOR: _____

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ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

BBL EQUINOX at TRADITION, LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

302 Washington Avenue Extension
Albany, New York 12205

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ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

CERA, LLC
Name

4221 W. Boy Scout Boulevard, Suite 1000
Florida street address (P.O. Box NOT acceptable)

Tampa, Florida 33607
City, State, and 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, F.S.

Registered Agent's Signature (REQUIRED)

M:\1692\3219\Tradition Ent\BBL Equinox at Tradition-AOO.wpd

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ARTICLE IV - Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
Member (50%)	BBL at Tradition, LLC By: SWF, L.P., Member By: DRL, LLC, General Partner 302 Washington Avenue Extension Albany, New York 12203
Member (50%)	Equinox at Tradition, LLC c/o Equinox Companies 116 Wolf Road Albany, New York 12206

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ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

_____
Signature of a member or an authorized representative of a member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Paul J. Goldman, Esq., Authorized Representative
Typed or printed name of signee

Filing Fees:

$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)

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