Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 Phone : (215)563-0113 : (215)977-9386 Fax Number

DIVISION OF CORPORATION FLORIDA/FOREIGN LIMITED LIABILITY CO.

VILLAGE AT RIVERCLUB ACQUISITION, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VILLAGE AT RIVERCLUB ACQUISITION, LLC

(Must and with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or 'L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Frincipal Office Address:	ivianing Address:
209 Town Center Boulevard	209 Town Center Bouleyard
Davenport, FL 33896	Davenport, FL 33896

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:

W. Bradley Munroe	e, Esquire	
Na	me	
239 E. Virginia S	treet	
Florida street address (P.O. Box NOT acceptable)		
Tallahassee,	FL 32301	
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)

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APPROVED

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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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR James S. Carr 209 Town Center Boulevard Davenport, FL 33896 MGR Heidi Marling 209 Town Center Boulevard Davenport, FL 33898 (Use attachment if necessary) 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.)

Robert Worthington, Jr., Authorized Person
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 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE

