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To:

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DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**ATLANTIC AMERICAN INVESTMENT FUND PARTNERS, LLC**

Certificate of Status	1
Certified Copy	0
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H06000193727 3

**ARTICLES OF ORGANIZATION  
ATLANTIC AMERICAN CDO INVESTMENT FUND PARTNERS, LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is ATLANTIC AMERICAN CDO INVESTMENT FUND PARTNERS, LLC.

**ARTICLE II – Address:**

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

101 E. Kennedy Blvd., Suite 3300  
Tampa, Florida 33602

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 1st day of August, 2006.

  
\_\_\_\_\_  
Signature of 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.)

\_\_\_\_\_  
Julio C. Esquivel, Esq.  
Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **ATLANTIC AMERICAN CDO INVESTMENT FUND PARTNERS, LLC.**

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

Julio C. Esquivel, Esq.  
Shumaker, Loop & Kendrick, LLP  
101 East Kennedy Blvd.  
Suite 2800  
Tampa, Florida 33602

*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.*

  
Signature

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