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ACCOUNT NO. : 072100000032 REFERENCE: 627514 AUTHORIZATION : / COST LIMIT : ORDER DATE: November 29, 2006 ORDER TIME : 10:15 AM ORDER NO. : 627514-005 CUSTOMER NO: 7448543 DOMESTIC FILING COLONIAL SQUARE ASSOCIATES, NAME: LLCEFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Colonial Square Associates, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C," or "L.C,	ARTICLE 1 - Name:	. 0
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company Principal Office Address: 9930 Laurel Valley Avenue Circle Bradenton, Florida 34202 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: Glen M. Eisenhut Name 9930 Laurel Valley Avenue Circle Florida street address (P.O. Box NOT acceptable) Bradenton, Florida 34202 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 as 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.	The name of the Limited Liability Company is:	E SECTION OF THE SECT
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Registered Agent's Signature (REQUIRED)		, ο Α

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Page 1 of 2

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

"MGR" = Mana		Name and Address:
"MGRM" = Ma		
MGR		Clarkt Cincolns
NICIK		Glen M. Eisenhut
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LE V: Effective fective date is li days after the d	date, if other than the date sted, the date must be specate of filing.) GNATURE: Signature of a member or a (In accordance with section 6)	n authorized representative of a member. 08.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury
(Use attachment LE V: Effective fective date is li days after the d	date, if other than the date sted, the date must be specate of filing.) GNATURE: Signature of a member or a this document constitutes as	n authorized representative of a member. 08.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury

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)