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146831 May 10, 2007

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S	ERVICES	CORPORATION NAME (S) AND DOCUMENT NUMBER
**************************************		Investments of Sarasota III, LLC
		57. <b>3</b>
	Filing Evidence  □ Plain/Confirmation Cop	Type of Document  Certificate of Status
	□ Certified Copy	□ Certificate of Good Standing
		□ Articles Only
	Retrieval Request  Photocopy  Certified Copy	<ul> <li>□ All Charter Documents to Include Articles &amp; Amendments</li> <li>□ Fictitious Name Certificate</li> <li>□ Other</li> </ul>
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	Non Profit	Resignation of RA Officer/Director
X	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Reports	Foreign
	Fictitious Name	Limited Liability
	Name Reservation	Reinstatement
	Reinstatement	Trademark
		Other

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: TAG INVESTMENTS OF SARASOTA III, LLC (Must end 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: Principal Office Address: **Mailing Address:** 5053 Ocean Blvd, Suite 250 5053 Ocean Blvd, Suite 250 Sarasota, FL 34242-1607 Sarasota, FL 34242-1607 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: Peter T. Currin Name 200 South Orange Avenue

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..

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REOUIRED)

City, State, and Zip

Sarasota

(CONTINUED)
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" = Manager "MGRM" = Managing Me	mber
MGRM	Robert T. Anderson Jr.
	5053 Ocean Blvd, Suite 250
	Sarasota, FL 34242
MGRM	Kim Sorensen
	5053 Ocean Blvd, Suite 250
	Sarasota, FL 34242
(Use attachment if necessar	гу)
CLE V: Effective date, if oth ffective date is listed, the date of filing	er than the date of filing: (OPTION, ate must be specific and cannot be more than five business days.)
REQUIRED SIGNATUR	<b>E:</b>

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.)

Rachel Abarbanel, 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)