

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : LLOYD GRANET
Account Number : 074632001025
Phone : (561) 999-9300
Fax Number : (561) 999-9400

FLORIDA/FOREIGN LIMITED LIABILITY CO.**Crossroads Plaza FP II & III LLC**

Certificate of Status	4 1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 JUN 15 AM 9:30

ARTICLE I - Name:

Name of the limited liability company is:
Crossroads Plaza FP II & III LLC

ARTICLE II - Address:

Street address of the principal office of the limited liability company is:
**c/o Tulepan Management LLC
11555 Heron Bay Boulevard, Suite 200
Coral Springs, FL 33076**

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and Florida street address of the registered agent are:
**LLOYD GRANET, P.A.
2295 NW CORPORATE BLVD, STE. 235
BOCA RATON, FL 33431-7330**

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.

By: Registered Agent's Signature

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

Signature of a member or an authorized representative of a member

Lloyd Granet
Typed or printed name of signee