Electronic Filing Cover Sheet

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(((H07000176166 3)))



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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : LLOYD GRANET

Account Number: 074632001025

Phone CFax Number : (561)999-9300

: (561)999-9400

LORIDA/FOREIGN LIMITED LIABILITY CO.

Crossroads Plaza FP IX LLC

| Certificate of Status | i |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
| 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:

Crossroads Plaza FP IX LLC

ARTICLE II - Address:

The mailing and street address of the principal office of the limited liability company is:

c/o Comnet Realty, Inc. 4800 N. Federal Highway, Suite 205-B Boca Raton, FL 33431

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