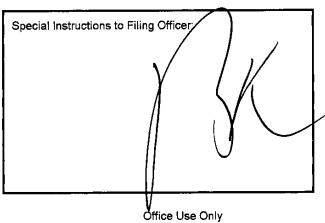
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(Requestor's Name)
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(Business Entity Name)
(223)
(Document Number)
Certified Copies Certificates of Status





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DA SEKAICE COMPART.	
ACCOUNT NO.: 072100000032	
REFERENCE: 290056 4371467	
AUTHORIZATION Spelbellena : F. S. T.	
COST LIMIT: \$125.00	
ORDER DATE: October 25, 2007	C
ORDER TIME : 4:15 PM	
ORDER NO. : 290056-005	
CUSTOMER NO: 4371467	
DOMESTIC FILING	
NAME: HW PICKETTVILLE GP, LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Debbie Skipper - EXT. 2948	
EXAMINER'S INITIALS:	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## HW PICKETTVILLE GP, LLC

Article I: The name of the limited liability company is HW Pickettville GP, LLC

Article II: The address of the principal office of the limited liability company is:

5430 LBJ Freeway, Suite 800 Dallas, TX 75240

Article III: The name and the Florida street address of the registered agent are:

Corporation Services Company 1201 Hays Street Tallahassee, FL 32301

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.

Registered Agent's Signature

Deborah D. Skipper Asst. V. Pres.

In accordance with section 608.408(3), Florida Statues, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Linda S. Morris, Organizer