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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353
Phone: (212)431-5000
Fax Number: (212)431-1441

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MECKINED

SECRETARY OF STATE

ALLAHASSEE, PLORIDA

RCNJ PROPERTIES LLC

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G. MCLEOD

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JUN - 5 2008

EXAMINER

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6/4/2008

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RCNJ PROPERTIES LLC		
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability C	ompany is:
rincipal Office Address:	Mailing Address:	
15808 ALMONDWOOD DRIVE	15606 ALMONDWOOD DRIVE	
TAMPA, FL 33613		
	TAMPA, FL 33613 Legistered Office, & Registered Agent's Signatures of the registered agent are:	<u>+</u>
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Signatures of the registered agent are:	ure: -t AH
ARTICLE III - Registered Agent, R The name and the Florida street address ROBERT CHASE	egistered Office, & Registered Agent's Signatures of the registered agent are:	ure: 4
ARTICLE III - Registered Agent, R The name and the Florida street addres ROBERT CHASE	egistered Office, & Registered Agent's Signatus of the registered agent are: Name	TUN-4 AH 9:
ARTICLE III - Registered Agent, R The name and the Florida street address ROBERT CHASE 16606 ALMONDWO Florid	egistered Office, & Registered Agent's Signatures of the registered agent are:	TUN-4 AH 9:
ARTICLE III - Registered Agent, R The name and the Florida street address ROBERT CHASE 15606 ALMONDWO Florida TAMPA, FL 33613	egistered Office, & Registered Agent's Signatus of the registered agent are: Name	TUN-4 AH 9:

(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:

<u>[itle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGRM	ROBERT CHASE
YIOI III	15806 ALMONDWOOD DRIVE
	TAMPA, FL 33613
•	
	- A SAME AND ADDRESS OF THE SA
	
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(Use attachment if necessary)	
NOTE: An additional article must b	oe added if an effective date is requested.
REQUIRED SIGNATURE:	7 // /
• /	or an authorized representative of a member.
(In accordance with sect of this document constit that the facts stated be	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury prein are true.)
JUSTIN T. REED. O	prosnizor

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\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signec