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Florida Department of State
Division of Corporations
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L. SELLERS

DEC 18 2008

EXAMINER

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : MOMBACH, BOYLE & HARDIN, P.A.
Account Number : 074143000064
Phone : (954) 467-2200
Fax Number : (954) 467-2210

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LP AOPKA, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION
OF
LP APOPKA, LLC

The undersigned, as the authorized representative of the initial member of LP APOPKA, LLC, a Florida limited liability company formed hereunder (the "Company"), on behalf of the members of the Company, hereby forms a limited liability company under the laws of the State of Florida.

ARTICLE I
COMPANY NAME

The name of the company is LP APOPKA, LLC.

ARTICLE II
COMMENCEMENT AND TERM OF EXISTENCE

In accordance with Section 608.409(1) of the Florida Limited Liability Company Act (the "Act"), the term of existence of the Company shall commence upon the filing of these executed Articles of Organization with the Florida Department of State, and shall continue perpetually, unless otherwise dissolved.

ARTICLE III
MAILING ADDRESS AND STREET ADDRESS OF COMPANY

The mailing address and the street address of the principal office of the Company is:

500 East Broward Boulevard
Suite 1950
Fort Lauderdale, Florida 33394

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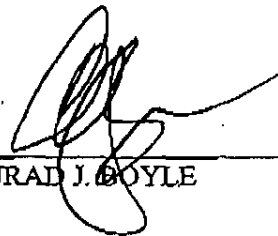
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ARTICLE IV
REGISTERED AGENT AND REGISTERED AGENT ADDRESS

The registered agent and the street address of the registered agent of this Company in the State of Florida shall be:

Conrad J. Boyle
Mombach, Boyle & Hardin, P.A.
500 East Broward Boulevard
Suite 1950
Fort Lauderdale, Florida 33394

IN WITNESS WHEREOF, the undersigned being the authorized representative of the initial members of the limited liability company hereby executes these Articles of Organization, this 17th day of December, 2008.

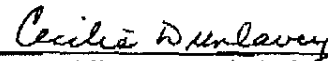


CONRAD J. BOYLE

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 17th day of December, 2008, by CONRAD J. BOYLE, who is personally known to me or who has produced a Florida driver's license as identification.





Notary Public - State of Florida
My Commission Expires:
Commission Number:

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Having been named as registered agent and to accept service of process for the above 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.

DATED this 17th day of December, 2008.



CONRAD J. BOYLE

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