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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CUMMINGS & LOCKWOOD
Account Number : 102336001100
Phone : (239) 649-3186
Fax Number : (239) 263-0703

FLORIDA/FOREIGN LIMITED LIABILITY CO.**Platypus Properties Sub-I LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

S. HAWKES

JUN 30 2009

EXAMINER**RECEIVED**

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ARTICLES OF ORGANIZATION
OF
PLATYPUS PROPERTIES SUB-I LLC

ARTICLE I
NAME

The name of this Limited Liability Company is PLATYPUS PROPERTIES SUB-I LLC
(the "Company").

ARTICLE II
ADDRESS

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

6582 Trail Boulevard
Naples, Florida 34108

ARTICLE III
PURPOSE

The purpose of the Company shall be for any lawful business purpose as a manager-managed limited liability company.

ARTICLE IV
REGISTERED OFFICE AND AGENT

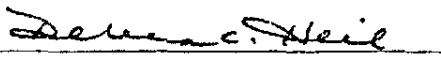
The initial registered agent and office of this Company shall be Debra C. Heil, 6582 Trail Boulevard, Naples, Florida 34108.

ARTICLE V
MANAGEMENT

The name and address of the Manager is:

Debra C. Heil
6582 Trail Boulevard
Naples, Florida 34108

Dated this ____ day of June, 2009.



Debra C. Heil
Authorized Representative

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ACCEPTANCE OF INITIAL REGISTERED AGENT

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 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, Florida Statutes.

Debra C. Heil, having been designated to act as registered agent, agrees to act in such capacity.



DEBRA C. HEIL

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