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FLORIDA LIMITED LIABILITY CO.
RESIDENTIAL ASSOCIATES, LLC

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MAR - 5 2010

EXAMINER

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ARTICLES OF ORGANIZATION

RESIDENTIAL ASSOCIATES, LLC

a Florida limited liability company

ARTICLE I

The business and affairs of the Limited Liability Company shall be conducted under the name of:

RESIDENTIAL ASSOCIATES, LLC

ARTICLE II PRINCIPAL OFFICE

The street and mailing address of the principal place of business of the Limited Liability Company shall be:

26109 82nd Avenue East Myakka City, Florida 34251

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

John Oake 26109 82rd Avenue East Myakka City, Florida 34251

ARTICLE IV EFFECTIVE DATE

The effective date of filing of these Articles of Organization is March 4, 2010.

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SECRETARY OF STATE DIVISION OF CORPORATIONS Audit# (((H10000050488 3)))

ARTICLE V MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the ________, 2010.

John Oake "Authorized Representative" Audit# (((H70000050488 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

RESIDENTIAL ASSOCIATES, LLC

2. The name and the Florida street address of the registered agent is:

John Oake 26109 82nd Avenue East Myakka City, Florida 34251

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

John Oake "Registered Agent"

Audit# (((H10000050488 3)))