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Division of Corporations  
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L. SELLERS

APR 16 2011

EXAMINER

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

From: GAIL S ANDRE  
Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
Account Number : 072720000036  
Phone : (407) 843-4600  
Fax Number : (407) 843-4444

PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.

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FLORIDA LIMITED LIABILITY CO.  
450 CROWN, LLC

Certificate of Status	0
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**TO:**

Name: **DIVISION OF CORPORATIONS**  
Company:  
Fax Number: **1-850-617-6383**  
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**ARTICLES OF ORGANIZATION  
OF  
450 CROWN, LLC**

**ARTICLE I - NAME**

The name of this limited liability company is 450 CROWN, LLC (the "Company").

**ARTICLE II - PRINCIPAL OFFICE**

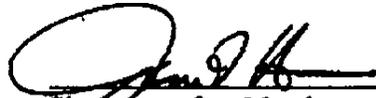
The mailing address and street address of the principal office of the Company is 3300 University Boulevard, Suite 218, Winter Park, Florida 32792.

**ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is James F. Heekin, Jr.

**ARTICLE IV - MANAGEMENT**

The Company is to be managed by one or more managers and is, therefore, a manager-managed company.



Signature of a Member or an Authorized Representative of a Member

James F. Heekin, Jr.

Typed or Printed Name of Signer

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**ACCEPTANCE OF 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 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, Florida Statutes.

  
James F. Heekin, Jr.