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FLORIDA LIMITED LIABILITY CO.

Creekside Apartments Jacksonville, LLC

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FAX AUDIT # #11 000 2277 673

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ARTICLES OF ORGANIZATION OF

Sconelani OF STATE FALLAMASSEE, FLORIDA

Creekside Apartments Jacksonville, LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Creekside Apartments Jacksonville, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 300 State Street East, Unit 226, Oldsmar, Florida 34677.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Melvin Johnson, 300 State Street East, Unit 226, Oldsmar, Florida 34677. Located in the County of Pinellas.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the managing members and the name and address of the member of the Limited Liability Company is:

Andtback & Harling AB, 300 State Street East, Unit 226, Oldsmar, Florida 34677

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

Date: September 14, 2011

WI 53717 608-827-5300

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FAX AUDIT # H11000 2277673

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Creekside Apartments Jacksonville, LLC

The name and address of the registered agent and office is Melvin Johnson, 300 State Street East, Unit 226, Oldsmar, Florida 34677. Located in the County of Pinellas.

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

Signature:

Melvin Johnson

Date: Augus + 31, 2011

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