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L. SELLERS

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EXAMINER

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COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT:	Delray Squa	re Investors, LLC	
SUBSECT:	Name of Limite	d Liability Company	
The enclosed Article	es of Organization and fee(s) are s	submitted for filing.	
Please return all corr	respondence concerning this matte	er to the following:	
	Joe (Carosella	
		Name of Person	
	Retail Prop	erty Group, Inc.	
		Firm/Company	
	101 Plaza Real	South, Suite 200	
		Address	
	Boca Raton	, Florida 33432	
	City	/State and Zip Code	
	Accounti	ng@rpg123.com or future annual report notification)	
For further information	ion concerning this matter, please	•	
Roz	Schulman	at (561) 961-17	734
Na	me of Person	Area Code & Daytime Telep	shone Number
Enclosed is a check	k for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp.	any is:		
Delray Square	e Investors, LLC		
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
101 Plaza Real South, Suite 200 Boca Raton, FL. 33432	101 Plaza Real South, Suite 200 Boca Raton, FL. 33432		
Boca Raton, PL. 33432	Doca (Valor), 1 E. 33432		
The name and the Florida street address of Joe	of the registered agent are: Carosella Name		
101 Plaza Rea	al South, Suite 200		
Florida st	reet address (P.O. Box NOT acceptable)		
Boca Raton	_{FL} 33432		
	City, State, and Zip		
liability company at the place designat registered agent and agree to act in this co statutes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and its registered agent as provided for in Chapter 608, F.S		
Registered Agent's	asella Signature (REQUIRED)		

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Me	mber
MGRM	Joe Carosella
	101 Plaza Real South, Suite 200
	Boca Raton, FL. 33432
(Use attachment if necessa	rv)
•	
ICLE V: Effective date, if oth	er than the date of filing: (OPTIONAL ate must be specific and cannot be more than five business days
90 days after the date of filin	
REQUIRED SIGNATUR	E:
\sim	// NA
	ol and a
	of a member or an authorized representative of a member.
constitutes an affir I am aware that an	n section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. If also information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.)
	Joe Carosella
	Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)