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Division of Corporations

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Page 1 of 1

**#L11000109701**

Florida Department of State  
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Fax Number : (850) 617-6383

From: Account Name : BERMAN, RENNERT, VOGEL & MANDLER, P.A.  
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**FLORIDA LIMITED LIABILITY CO.  
C1 Barcelona 2, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

K. SALY  
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FAX AUDIT NO. H11000230391 3

**ARTICLES OF ORGANIZATION  
OF  
C4 BARCELONA 2, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I - Name**

The name of the Limited Liability Company is: **C4 BARCELONA 2, LLC.**

**ARTICLE II - Address**

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


1398 SW 1<sup>st</sup> Street, 12<sup>th</sup> Floor  
Miami, Florida 33135

**ARTICLE III - Registered Agent/Office**

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

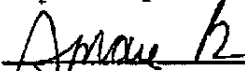
Stephanie Berman  
1398 SW 1<sup>st</sup> Street, 12<sup>th</sup> Floor  
Miami, Florida 33135

*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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 608, F.S.*

  
Stephanie Berman

The undersigned member has executed these Articles of Organization this 23<sup>rd</sup> day of September, 2011.

CARRFOUR SUPPORTIVE HOUSING, INC., a Florida  
not for profit corporation, sole member

By:   
Name: Stephanie Berman  
Title: President

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  
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