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NAME:

GARNET OCALA MF REAL ESTATE LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

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| TO: Registration of Division of | on Section Corporations | | | | | |
|---|---|---|---|--|-----------------------|----------------|
| SUBJECT: Garnet Ocala MF Real Estate, LLC | | | | | | |
| · · · · · · | Name of Limite | ed Liability Compa | ıny | | | |
| The enclosed Article | es of Organization and fee(s) are s | submitted for filing | <u>;</u> . | | | |
| Please return all com | respondence concerning this matt | er to the following | : | | | |
| <u>Capitol</u> | Services Corpora | te Filings 7 | <u>[eam</u> | | | |
| Capitol | Services, Inc. | | | | | |
| | | Firm/Company | | | | |
| 800 Bra | azos, Suite 400 | | | | | |
| | | Address | | | | |
| Austin, T | | | | | | |
| | Cit | y/State and Zip Code | | | | |
| ken.kraer | mer@sabalfin.com | | | | <u> </u> | 12 |
| | E-mail address: (to be used f | or <u>future annual repo</u> | rt notification) | 1 | 7>% | کے |
| For further informat | ion concerning this matter, please | e call: | | | HASE. | 2 |
| | | at (800 . | 345-464 | 47 | <u>in</u> c′ in −. | <u>بد</u> |
| | me of Person k for the following amount: | Area Code | & Daytime Te | elephone Number | FLORID | JUN-4 AM 9: 02 |
| \$125,00 Filing Fee | \$130,00 Filing Fee & Certificate of Status | \$155,00 Filin Certified Cop (additional copy | рy | \$160.00 Fi Certificate Certified C (additional c | of Status Copy | e, s & |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registrati Division Clifton B 2661 Exe | ourier Address on Section of Corporation duilding contive Center see, FL 32301 | ons r Circle | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|--|--|
| The mains of the Diffined District, Company is. | |
| Garnet Ocala MF Real Estate, | LLC |
| (Must end with the words "Limited Liability | ty Company, "L.J., C.," or "LLC.") |
| ARTICLE II - Address: | • |
| The mailing address and street address of the pri | incipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 4675 MacArthur Court, Sulte 1550 | 4675 MacArthur Court, Suite 1550 |
| Newport Beach, California 92660 | Newport Beach, California 92660 |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re Corporation Servi Name 1201 Hays | ered Agent. You must designate an individual or another egistored agent are: |
| | ress (P.O. Box NOT acceptable) |
| Tallahassee, | <u>駅 32301</u> 空 空 |
| City, Sia | ité, and Zip |

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, F.S..

(CONTINUED)

Rogistered Agent's Signature (REQUIRED)

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: Name and Address: Title: "MGR"= Manager "MCRM" = Managing Member MGR Sabal Financial Group, L.P. 4675 MacArthur Court, Sulte 1550 Newport:Beach, California 92660 (Use attachment if necessary) ARTICLE V. Effective date if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.). REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In mecordance with section 608.408(3), Fibrida Statutes, the execution of this document constitutes, an affirmation without the penalties of perjury that the facts stated here in a fee true. I am aware that any talse information submitted in a document to the Department of State constitutes a third degree feloity as provided for in a 317.15.5, R.S.) J. Michael McCoy Typed or printed name of signot Flling Fees: \$125:00 Filing Per for Articles of Organization and Designation of Registered Agent \$ 30:00 Certified Copy (Optional): \$ 5:00 Certified Copy (Optional)

Page 2 of 2



June 5, 2012

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: GARNET OCALA MF REAL ESTATE, LLC

Ref. Number: W12000030649

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the <u>electronic filing cover sheet</u>.

The money in your account is insufficient to cover the cost of filing this document. Please send additional money to cover this particular filing and other filings you wish to process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 112A00015892

Barbara Bostick Regulatory Specialist II

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