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SECRETARY OF STATE DIVISION OF CORPORATION:

C. LEWIS

SEP 13 2012

EXAMINER

OXTAL REAL ESTATE

Advisors, Inc.

Ronald A. Oxtal, MAI, President State-Certified General Appraiser #RZ265

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1102 West Cass Street Tampa, Florida 33606 (813) 209-9616 (813) 209-9515 (Fax) Ron@Oxtalrea.com www.oxtalrea.com

September 11, 2012

Florida Department of State Division of Corporations Registration Section P.O. Box 6327 Tallahassee, Florida 32314

RE: OREA Holdings LLC

Please find attached as instructed:

- Cover Letter
- Articles of Incorporation for Florida Limited Liability Company
- Filing Fee of \$125.00 (Check No. 6159 dated 9/10/12)

Please do not hesitate to let us know if you have any questions.

Ronald A. Oxtal

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OREA Holdings LLC	
	ed Liability Company
The enclosed Articles of Organization and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Ronald A. Oxtal	
	Name of Person
OREA Holdings LLC	
	Firm/Company
1102 W Cass Street	
	Address
Tampa, FL 33606	
	/State and Zip Code
Ron@oxtairea.com E-mail address: (to be used for	or future annual report notification)
For further information concerning this matter, please	call:
Ronald A Oxtal	at (813) 209-9616 x232
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{Certificate of Status}\$	\$155.00 Filing Fee & \$160.00 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 P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	ic	
	13.	
OREA Holdings LLC		
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Liabil	lity Company is:
Principal Office Address:	Mailing Address:	
1400 W.O O 4	4400 114 0 044	
102 W Cass Street	1102 W Cass Street Tampa, FL 33606	
Tampa, FL 33606	Tampa, FL 33000	
ARTICLE III - Registered Agent, Registe The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)		
The name and the Florida street address of the	ne registered agent are:	
Ronald A. Oxtal		201
Na	ume	S .2
1102 W Cass \$	Street	DIVISION OF CORP
Florida street	address (P.O. Box NOT acceptable)	~ g₹
Tampa	_{FI} 33606	≥ - ₹

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

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

CRETARY OF STATE

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

2012 SEP 12 AM 11: 06

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Ronald A. Oxtal 1102 W Cass Street Tampa FL. 33606
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: <u>September 52012</u> (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 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Ronald A. Oxtal

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)