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SECRETARY OF CIVIE

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EXAMNER

COVER LETTER

| TO: Registration Division of | n Section Corporations | |
|------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: Gulf | stream Real Estate | e Advisors, LLC. |
| | Name of Limit | ed Liability Company |
| The enclosed Article | s of Organization and fee(s) are | submitted for filing. |
| Please return all corr | respondence concerning this matt | ter to the following: |
| Randy | Barnhardt | |
| | | Name of Person |
| Gulfstre | eam Real Estate Ad | dvisors, LLC. |
| | | Firm/Company |
| 4003 S | Westshore Blvd. S | uite 4016 |
| | | Address |
| Tampa, F | Florida 33611 | |
| | | y/State and Zip Code |
| randybarı | n22@hotmail.com | or future annual report notification) |
| | | |
| For further informati | on concerning this matter, please | call: |
| Randy Barnha | rdt | at (813) 464-0220 Area Code & Daytime Telephone Number 5 |
| Na | me of Person | |
| Enclosed is a check | for the following amount: | |
| \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

| AKTICLE 1 - Name: | |
|----------------------------------------------|------------|
| The name of the Limited Liability Company is | 5 : |
| | |

Gulfstream Real Estate Advisors, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

| Principal Office Address: | Mailing Address: |
|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Gulfstream Real Estate Advisors, LLC. 4003 S. Westshore Blvd., Suite 4016 Tampa, FL. 33611 | Gulfstream Real Estate Advisors, LLC. 4003 S. Westshore Blvd., Suite 4016 Tampa, FL. 33611 |
| | tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are: |
| | Name 'm' in |
| 4003 S. Westsho | ore Blvd., Suite 4016 |
| Florida stre | eet address (P.O. Box NOT acceptable) |
| Tampa | _{FL} 33611 |
| Ci | ty, State, 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..

Register Agent's Signature (REQUIRED)

(CONTINUED)

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

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

| "MGR" = Manager "MGRM" = Managing Member | |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | |
| MGRM | Randy Barnhardt |
| | 4003 S. Westshore Blvd., Suite 4016 |
| | Tampa, FL 33611 |
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| days after the date of filing.) | |
| and also the case of mings, | 5名 5名 |
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| REQUIRED SIGNATURE: | / |
| Rowy Bon | hut |
| Signature of a member of | r an authorized representative of a member. |
| | 08(3), Florida Statutes, the execution of this document |

constitutes a third degree felony as provided for in s.817.155, F.S.)

Randy Barnhardt

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)