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(850) 245-6051.

COVER LETTER

TO:

Registration Section
Division of Corporations

GREF II REIT I LLC dba Garrision Orlando Flex Airport LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Morrow

Name of Person

Garrision Orlando Flex Airport LLC

Firm/Company

1350 Avenue of the Americas 9th Floor

Address

New York, NY 10019

City/State and Zip Code

jmorrow@garrisoninv.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Morrow

.,212

372-9500

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check 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 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 Co	mpany is:
GREF II REIT I LLC	
	Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addres	ss of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Garrision Orlando Flex	
1350 Avenue of the Americas	
New York, NY 10019	
(The Limited Liability Company cannot serve as i business entity with an active Florida registration.) The name and the Florida street address Lincoln Property Com	ess of the registered agent are:
-	Name
	56 to 1
300 S. Orange Ave Si	
Flori	da street address (P.O. Box <u>NOT</u> acceptable)
Orlando,	FL 32801
	City, State, and Zip
liability company at the place designed registered agent and agree to act in all statutes relating to the proper at and accept the obligations of my pos	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of and complete performance of my duties, and I am familiar with sition as registered agent as provided for in Chapter 608, F.S
	EFIL REITI LUC
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Page 1 of 2

(CONTINUED)

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 "MGRM" = Managing Member	Name and Address:
MGR	Christine Thollander/ Lincoln Property Company of Florida
	300 S. Orange Ave Suite 1575
	Orlando, FL 32801 32801
•	
(Use attachment if necessary)	
	st be specific and cannot be more than five business
DECLUDED SIGNATURE	•
REQUIRED SIGNATURE:	
Signature of a memb	ho II and description of a member.
constitutes an affirmation under I am aware that any false infor	18.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State mation submitted in s.817.155, F.S.)

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)

Typed or printed name of signee