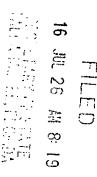
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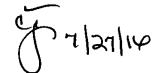


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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPITAL PERIMETER PLAZA, LLC

The enclosed Articles of Organization and fees are submitted for filing:

Please return all correspondence concerning this matter to:

George H. Gwynn Williams, Gautier, Gwynn, DeLoach & Sorenson, P.A. P.O. Box 4128 Tallahassee, FL 32315

E-mail address for future annual report notification: ginnyweaver@me.com

For further information concerning this matter, please call:

Cindi Young 850-386-3300

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

□\$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed) (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 OF CAPITAL PERIMETER PLAZA, LLC

FILED 16 JUL 26 AH 8: 19

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

ARTICLE 1 - Name:

The name of the Limited Liability Company (hereinafter referred to as the "Company") is:

"CAPITAL PERIMETER PLAZA, LLC"

ARTICLE II — Address:

The mailing address of the Company is:

P.O. Box 12279 Tallahassee, Florida 32317

and street address of the principal office of the Company is:

3305 Capital Circle NE Suite 205 Tallahassee, Florida 32308

ARTICLE III — Registered Agent:

The name and the Florida street address of the initial registered agent are:

Virginia A. Weaver 2007 Longview Drive Tallahassee, Florida 32303

ARTICLE IV — Management:

The Company is to be managed by a manager and is, therefore, a manager-managed company.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the members and acknowledged them to be my act this 25th day of July, 2016.

(In accordance with section 605.0203 (1) (b), 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.)

JANA WEAVER WALL

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

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 605, F.S.

TOWN PACK OF STATE

Filing Fee: \$100.00 for Articles of Organization

\$ 25.00 for Designation of Registered Agent