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Division of Corporations

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Account Number : 072720000036 Phone : (407)843-4600 Fax Number : (786)901-8020

Attn: Tami D. Pøssley

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO. PSM Sawgrass, LLC

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ARTICLES OF ORGANIZATION **PSM SAWGRASS, LLC**

ARTICLE I - NAME

The name of this limited liability company is PSM SAWGRASS, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The street address of the principal office of the Company is 3300 Publix Corporate Parkway, Lakeland, Florida 33811. The mailing address of the Company is Post Office Box 407, Lakeland, Florida 33802.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 3300 Publix Corporate Parkway, Lakeland, Florida 33811. The name of the registered agent at such address is Merriann M. Metz.

ARTICLE IV - MANAGEMENT

The Company is member-managed for purposes of Section 605.0407, Florida Statutes, and other relevant provisions of Chapter 605, Florida Statutes, and the initial member of the Company is Real Sub, LLC, 3300 Publix Corporate Parkway, Lakeland, Florida 33811.2

> /s/ Merriann M. Metz
>
> Merriann M. Metz, Authorized Representative of the Member

ACCEPTANCE OF 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, Florida Statutes.

/s/ Merriann M. Metz

Merriann M. Metz