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SUBJEC	1200 Cleary T:	vater RE, LLC			
		Name of Li	mited Liabili	ty Company	
The enclo	osed Articles of C	rganization and fee(s) ar	e submitted	for filing.	
Please ret	urn all correspor	dence concerning this m	atter to the fo	ollowing:	
	Diane Wildgo	ose, Paralegal			
			Name of I	Person	
	Partridge Sno	w & Hahn, LLP			
			Firm/Con	npany	
	40 Westminst	er St., Ste. 1100			
			Addre	c c	
			Addic	55	
	Providence, R	02903			
		C	ity/State and	Zip Code	
	dwildgoose@ps	h.com			
	E-1	nail address: (to be used	for future an	nual report notification	on)
For further i	nformation conc	erning this matter, please	call:		
	Diane Wildgoo	se, Paralegal 4()1	861-8226	
	Name o		ea Code	Daytime Telephone	Number
Enclosed i	s a check for the	following amount:			
_S125.00	Filing Fee	S130.00 Filing Fee &	-6166	00 Filing Fee &	_61(0.00 F)); p
		Certificate of Status	Certified		S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing A	Address	e,	treet Address	
	New Filir		_	ew Filing Section Div	ision
	Division	of Corporations	TI	he Centre of Tallahas	see
	P.O. Box	6327 ce, FL 32314		115 N. Monroe Street	
	i alialiass	PC-17D 02014	1 7	allahassee, FL 32303	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
1200 Clearwater RE, LLC			
(Must contain the words "Li	mited Liability Com	nany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin		,	
Principal Office Addres	<u>s</u> :	Mailing Address:	
2700 Bayshore Drive		2700 Bavshore Drive	<i>r</i>
Belleair Beach, FL 33786		Belleair Beach, FL 33786	
(The Limited Liability Company cannot serve as it another business entity with an active Florida region.) The name and the Florida street address of the server and the Florida street	istration.)	gent. You must designate an individ	ual or
The name and the Florida street address of the reg	istered agent are:		
<u>C T Corporation</u>	on System		
	Name		
1200 South Pir	ie Island Road		
Florida street a	address (P.O. Box <u>N</u> o	OT acceptable)	
Plantation	Florida	33324	
City	State	Zip	
laving been named as registered agent and to accep	nt service of process fo	or the above stated limited liability co	ompany at the

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..

By: /s/ Kendra Jesus Vice President

Registered Agent's Signature (REQUIRED)
Kendra Jesus

(CONTINUED)

Title:	Name and Address:
	norized Member
"MGR" = Mana	ger
Manager	
	2700 Bayshore Drive Belleair Beach, FL 33786
	Belleair Beach, Fl. 33786
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<u> </u>	
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ARTICLE IV-