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COVER LETTER

	ew Filing Section ivision of Corporations				
SUBJECT	Bayside Gardens H GP, LLC				
SUBJECT	Name of Limited Liability Company				
The enclos	ed Articles of Organization and fee(s) are submitted	for filing.		
Please retu	rn all correspondence concerning this	s matter to the f	ollowing:		
	Jennifer Vinciguerra				
		Name of	Person		
	Fox Rothschild LLP				
		Firm/Co	mpany		
	2800 Kelly Rd., Ste. 200				
	Address				
	Warrington, PA 18976				
	City/State and Zip Code Gail@fwbha.org				
		sed for future a	nnual report notification)		
For further i	nformation concerning this matter, pl	ease call:			
	Gail Sansbury	850	243-3224		
	Name of Person	Area Code	Daytime Telephone Number		
Enclosed i	s a check for the following amount:				
\$125.00 F	lling Fee S130.00 Filing Fee & Certificate of Status	LCertifit	0 Filing Fee & S160.00 Filing Fee, ed Copy Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing 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 Company is:			
Bayside Gardens H GP, LLC			
(Must contain the words "Limited Lia	ability Compai	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limi	ed Liability Company is:	
Principal Office Address:		Mailing Address:	
27 Robinwood Drive SW	2	Robinwood Drive SW	
Fort Walton Beach, FL 32548	<u>F</u>	ort Walton Beach, FL 32548	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agei		r
The name and the Florida street address of the registered a	gent are:	TAL!	7024 F
Gail Sansbury			
ì	Name	(1999) (1999) (1999)	15
27 Robinwood Drive S	W		Z ir
Florida street address (P.O. Box NO	acceptable)	- X 11
Fort Walton Beach	FL	32548	<u> </u>
City	State	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 605, F.S..

(CONTINUED)

Gail Sansbury
Registered Agent's Signature (REQUIRED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Fort Walton Beach Revitalization, Inc. AMBR 27 Robinwood Drive SW Fort Walton Beach, FL 32548 (Use attachment if necessary) _. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: ___ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Gail Sansbury Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Gail Sansbury