

L12000130817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

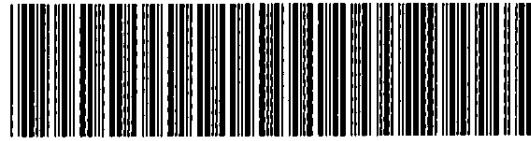
(Business Entity Name)

(Document Number)

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2012 OCT 12 PM 4: 17
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APPROVED
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12 OCT 12 AM 9: 37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 15 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 379694 7837538

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 125.00

ORDER DATE : October 12, 2012

ORDER TIME : 2:28 PM

ORDER NO. : 379694-005

CUSTOMER NO: 7837538

DOMESTIC FILING

NAME: 815 CASEY KEY LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - EXT. 52951

EXAMINER'S INITIALS: _____

12 OCT 12 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR
815 CASEY KEY LLC**

The undersigned, being an authorized person to execute these Articles of Organization,
hereby certifies as follows:

ARTICLE 1 – Name:

The name of the limited liability company is:

815 CASEY KEY LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the limited liability company is:

6 Pine Valley Way
Florham Park
New Jersey 07932

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Corporation Service Company
Name

1201 Hays Street
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee, Florida 32301
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12 OCT 12 AM 9:37

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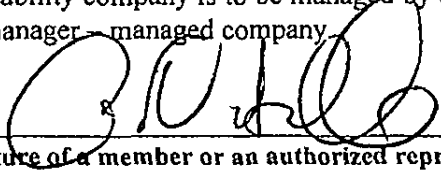
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 608, F.S.

By: Carina L. Dunlap
Registered Agent's Signature

Carina L. Dunlap
Asst. Vice President

ARTICLE IV – Management (Check box if applicable.)

- The limited liability company is to be managed by one manager or more managers and is, therefore, a manager – managed company.



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

ANTHONY F. VITIELLO, ESQ.

Typed or printed name of signee

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