# L02000025873



ACCOUNT NO. : 072100000032

83930A

AUTHORIZATION :

COST LIMIT : \$ 155.00

REFERENCE: 766003

ORDER DATE: October 1, 2002

ORDER TIME : 11:41 AM

ORDER NO. : 766003-005

CUSTOMER NO: 83930A

CUSTOMER: Ms. Linda Lacertosa

Frazier Hotte & Associates, Pa

Suite 826

2400 East Commercial Boulevard

Ft. Lauderdale, FL 33308

DOMESTIC FILING

NAME:

WESTON SOUTH OFFICE, LLC

EFFECTIVE DATE:

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EFFECTIVE DATE

		ARTICLES	OF	INC	INCORPORATION			
		CERTIFICA	ATE	OF	LIMITED	PARTNERSHI		
Vame	XX	ARTICLES	OF	ORC	BANIZATIO	ON		

Availability PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: Document<sub>XX</sub>

CERTIFIED COPY PLAIM STAMPED COPY CERTIFICATE OF GOOD STANDING

Updater -

Updater CONTACT PERSON: Sara Lea - EXT. 1114

DOC Verifyer

Asimo ledgement ひしじ

Examiner

W. P. Verifyer UCC EXAMINER'S INITIALS:

 $\Box$ 

4 page 705000098 388



Secretary of State

October 1, 2002

SARA LEA CSC TALLAHASSEE, FL

SUBJECT: WESTON SOUTH OFFICE, LLC

Ref. Number: W02000028388

We have received your document for WESTON SOUTH OFFICE, LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 1, 2002. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Corporate Specialist

Letter Number: 402A00055293



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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I**

#### NAME

LLC.

The name of the Limited Liability Company is WESTON SOUTH OFFICE,

ARTICLE II					
ADDRESS			RETA AHA	130	7
***	,		-88-E	1	-
id street address of t	he principal.	office	office	Limi	te/

The mailing address and street address of the principal office of the Limited Liability Company is 620 College Avenue, Haverford, PA 19041.

#### ARTICLE III

#### <u>MANAGEMENT</u>

The Limited Liability Company is to be managed by one of the members and the name and address of the initial managing member are: Barry J. Belmont, 620 College Avenue, Haverford, PA 19041.

#### ARTICLE III

#### **EFFECTIVE DATE**

The effective date of this Limited Liability Company is as of September 24 2002.

#### **ARTICLE IV**

## REGISTERED AGENT, REGISTERED OFFICE

### & REGISTERED AGENT'S SIGNATURE

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

ROBERT W. FRAZIER, JR., ESQ. FRAZIER, HOTTE & ASSOCIATES, P.A. 2400 East Commercial Boulevard, Suite 826 Fort Lauderdale, Florida 33308

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 FAMILIA DESTRUMBENT AS PROVIDED FOR IN CHAPTER 608, F.S.

Resident Agent's Signature

Signature of a member or an authorized

representative of a member

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

Robert W. Frazier, Jr., Esq., authorized representative
Typed or Printed name of signee