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(Requestor's Name) (Address) (Address)	_ 900021	334389
(City/State/Zip/Phone #)  (City/State/Zip/Phone #)  (Document Number)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	RK	FILED 03 JUL 29 PH 4: 04 BLEVELLAURSSEE, FLORIDA
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	ACCOUNT NO. : 07210000032
	REFERENCE : 185794 7366780
	AUTHORIZATION : aturia kints
	COST LIMIT : \$ 125.00
ORDER DATH	I: July 29, 2003
ORDER TIME	E: 2:02 PM
ORDER NO.	: 185794-005
CUSTOMER N	NO: 7366780
CUSTOMER:	Ms. Linda L. Graber American Financial Realty Trust 1725 The Fairway
	Jenkintown, PA 19046
	DOMESTIC FILING
NAM	4E: FIRST STATES INVESTORS 3057, LLC
	EFFECTIVE DATE:
CEF	TICLES OF INCORPORATION RTIFICATE OF LIMITED PARTNERSHIP
	TICLES OF ORGANIZATION
PLEASE RET	TURN THE FOLLOWING AS PROOF OF FILING:
	ERTIFIED COPY LAIN STAMPED COPY
	ERTIFICATE OF GOOD STANDING
	ERSON: Amanda Haddan - EXT. 1155

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

First States Investors 3057, LLC

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Con

Principal Office Address:

Mailing Address:

1725 The Friday Kintown.

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

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

Corporation Gervice Company 1201 Hays Street Florida street address (P.O. Box <u>NOT</u> acceptable) Tallahassee FL 32301 City, State, and 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 608, F.S..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV-Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Name and Address:

Title: "MGR" = Manager "MGRM" = Managing Member

MGK

ASST MGR ASST MGR

ASST MGR

Nicholas Schorsch Fastwal 040 lenn Blumerth 3046 Tassi iorletti Eastward

19046

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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

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.)

Edward J. Typed or printed name of signee

Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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