Division of Corporations
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LAHASSEE PLORIDA

To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Pax Number : (850)222-9428

LIMITED LIABILITY COMPANY

St. Andrews at Palm Aire, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR ST. ANDREWS AT PALM AIRE, LLC

ARTICLE I. Name. The name of the limited liability company is St. Andrews at Palm Aire, LLC.

ARTICLE II. Address: The mailing address and street address of the principal office of the limited liability company is: 801 Old York Road, Jenkintown, Pennsylvania 19046.

ARTICLE III. Registered Agent, Registered Office and Registered Agent's Signature: The name and the Florida street address of the registered agent are:

CT Corporation System c/o CT Corporation System 1200 South Pine Island Road Plantation, FL 33324

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 composite 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.

CT Corporation System

By:

Registered Agent's 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.)

<u>Vivian Luckiewicz</u>, <u>Authorized Representative</u>
Typed or printed name of signee