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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 298434 4368965

AUTHORIZATION :

COST LIMIT : \$ 125.00

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TALLAHASSEE, FLORIDA

ORDER DATE : April 5, 2005

ORDER TIME : 10:34 AM

ORDER NO. : 298434-005

CUSTOMER NO: 4368965

CUSTOMER: Christopher Flannery, Esq
Astor Weiss Kaplan & Mandel,
Llp
200 South Broad Street
6th Floor
Philadelphia, PA 19102

DOMESTIC FILING

NAME: BHA, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

BHA, LLC**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:1153 98th StreetBay Harbor Islands, FL 33154**Mailing Address:**1152 98th StreetBay Harbor Islands, FL 33154**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 Bays StreetFlorida street address (P.O. Box NOT acceptable)TallahasseeFLORIDA 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, Florida Statutes..

Corporation Service CompanyBy: 

Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Samuel Switzenbaum

200 S. Broad Street

Philadelphia, PA 19102

(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.)

By: Christopher P. Flannery, Authorized Representative
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)