

105000052007

00789-00524-00671

form Articles 120 of, agree

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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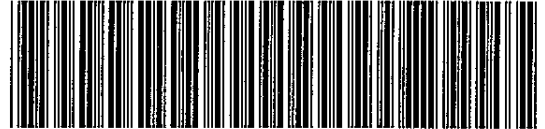
Certificates of Status _____

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05 MAY 25 PM 4:08

105-2462



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 16, 2005

BRUCE TOWNSEND
27300 JC LANE
BONITA SPRINGS, FL 34135

SUBJECT: PHILLY CROSSING, L.L.C.
Ref. Number: W05000024612

We have received your document for PHILLY CROSSING, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached Articles of Organization to form a new Limited Liability Company. We do not file the operating agreement.,

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 205A00035026

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Philly Crossing, L.L.C.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruce Townsend
(Name of Person)

(Firm/Company)

27300 J C Lane
(Address)

Bonita Springs, FL 34135
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Townsend at (941) 286-3995
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Philly Crossing, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

27300 JC Lane
Bonita Springs, FL
34135

Mailing Address:

27300 JC Lane
Bonita Springs, FL
34135

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

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

Bruce Townsend
Name

27300 JC Lane
Florida street address (P.O. Box **NOT** acceptable)

Bonita Springs FL 34135
City, State, and Zip

05 MAY 25 PM 4:08

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.

Bruce Townsend
Registered Agent's Signature

(CONTINUED)

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

Sarah Townsend
27300 JC Lane
Bonita Springs, FL 34135

MGRM

Bruce Townsend
27300 JC Lane
Bonita Springs, FL 34135

(Use attachment if necessary) Article V - The effective date shall be
MAY 24, 2005.

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

REQUIRED SIGNATURE:

Bruce Townsend
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.)

Bruce Townsend
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)