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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

: M. BURR KEIM COMPANY

Account Name : account Number : thone : I19990000242 (215) 563-8113 🔁 x Number (215) 977-9386

LIMITED LIABILITY COMPANY

Village Partners CM, LLC

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$130.00

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7/22/2005

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
Village Partners CM, LLC		
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
209 Town Center Boulevard	209 Town Center Boulevard	
Davenport, Fl. 33896	Davenport, FL 33896	
ARTICLE III - Registered Agent, Registe	ered Office, & Registered Agent's Signature:	
The name and the Florida street address of t	he registered agent are:	
W. Bradley Munroe, Esqui	re	
N	ame	
239 East Virginia Street		
Florida stree	t address (P.O. Box <u>NOT</u> acceptable)	
Tallahassee	FI. 32301	
City, Sta	ate, and Zip	
tiability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all eperformance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S.	
Rogistus	red Agent's Sighature	

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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" = Manag "MGRM" = Manag		
INICION TANKIN	aging Menor	
MGRM	Investors Realty Ltd., Inc.	
	209 Town Center Boulevard	
	Davenport, FL 33898	
MGRM	Carr Investments, LP	
·	11 Dale Lane	
	Malvern, PA 19355	"
		· ·
		<u> </u>
		
	<u> </u>	<u> +</u>
(Use attachment if	(necessary)	
(,	
NOTE: An addit	tional article must be added if an effective date is requested.	
	•	
REQUIRED SIG	NATURE:	
	Plan tom	
;	Signature of a member or an authorized sepresentative of a member.	•
	<u>~</u>	SFC 2005
	(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.)	
	Robert Worthington, Jr.	3 0
	Typed or printed name of signee	2 2 17
Filing Fees:	·	ر. الأساء ال

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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