

L05 000092755

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(City/State/Zip/Phone #)

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NOTICE OF RECORDS  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 606022 4720431

AUTHORIZATION :

*Patricia Figue*

COST LIMIT: \$ 125.00

ORDER DATE : September 20, 2005

ORDER TIME : 9:10 AM

ORDER NO. : 606022-165

CUSTOMER NO: 4720431

CUSTOMER: Ms Tina Grodziski  
Charming Shoppes, Inc.

450 Winks Lane

Bensalem, PA 19020

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DOMESTIC FILING

NAME: LANE BRYANT #8507, 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: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: \_\_\_\_\_

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LANE BRYANT #8507, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

450 WINKS LANE

BENSALEM, PA 19020

**Mailing Address:**

3750 STATE ROAD

BENSALEM, PA 19020

**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 Hays Street

Florida street address (P O. Box NOT acceptable)

Tallahassee

FLORIDA 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 Company

By: Deborah D. Skipper

Registered Agent's Signature

**Deborah D. Skipper  
Asst. V. Pres.**

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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

LANE BRYANT, INC.

450 WINKS LANE

BENSALEM, PA 19020

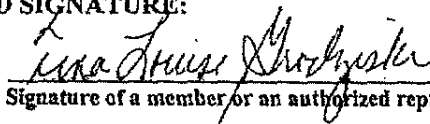
 

(Use attachment if necessary)

**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: TINA LOUISE GRODZISKI, 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)