# L05000099439

(Req	uestor's Name)	
(Add	ress)	<u></u>
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(City/	State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busi	ness Entity Name)	
(Docs	ument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi	ling Officer:	
	Office Use Only	



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ACCOUNT NO.: 072100000032 REFERENCE: 639274 7366780 AUTHORIZATION: COST LIMIT : \$ 130.00 ORDER DATE: October 6, 2005 ORDER TIME : 3:34 PM ORDER NO. : 639274-165 CUSTOMER NO: 7366780 DOMESTIC FILING FIRST STATES INVESTORS \_3/46, NAME: EFFECTIVE DATE: XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_\_ PLAIN STAMPED COPY XX \_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Denise Mick - EXT. 2950

EXAMINER'S INITIALS:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

FIRST STATES INVESTORS 3146, LLC

#### ARTICLE II - Address:

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

The maning address and succe address of the principal	office of the Limited Liability Company
Principal Office Address:	Mailing Address:
1725 THE FAIRWAY	1725 THE FAIRWAY
JENKINTOWN, PA 19046	JENKINTOWN, PA 19046
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered	, , ,
Corporation Service Company	
Name	
1201 Hays Street	
Florida street address (P.O. Box N	OT acceptable)
Tallahassee ri	ORIDA 32301

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..

City, State, and Zip

Corporation Service Company

By: Carla Lohi

Registered Agent's Signature

Carla Lohi

Asst Vice Preside 1

Page 1 of 2 (CONTINUED) ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MANAGER	NICHOLAS S. SCHORSCH
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
ASST. MANAGER	GLENN BLUMENTHAL
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
ASST. MANAGER	EDWARD J. MATEY JR.
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
ASST. MANAGER	SONYA A. HUFFMAN
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
(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: GLENN BLUMENTHAL, ASSISTANT MANAGER
Typed or printed name of signee

Filing Fees:

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\$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)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY (ADDENDUM)

#### For FIRST STATES INVESTORS 3146, LLC

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

ASST MGR

DAVID J. NETTINA 1725 THE FAIRWAY JENKINTOWN, PA 19046

GLENN BLUMENTHAL, ASSISTANT MANAGER