

12/21/05 WED 17:49 FAX 15613669145
Division of Corporations

STERLING CENTRE CORP

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Florida Department of State

Division of Corporations
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2005 DEC 21 A 10: 51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : DAVID J. WIENER, P.A.
Account Number : I20040000023
Phone : (561) 366-9144
Fax Number : (561) 366-9145

LIMITED LIABILITY COMPANY

AGA Associates, LLC

Certificate of Status	0
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Estimated Charge	\$125.00

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TRANSMITTAL LETTER

2005 DEC 21 A 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section Division of
Corporations

SUBJECT: AGA Associates, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and Facts are submitted for filing. Please return
all correspondence concerning this matter to the following.

Alan L. Shulman
(Name of Person)

(Firm/Company)

377 N Lake Way
(Address)

Palm Beach, Florida 33480
(City/State and Zip Code)

For further information concerning this matter, please call:

Alan L. Shulman at (561) 655-8033

Enclosed is a check for the following amount:

☒ \$125 Filing Fee ☐ \$130.00 Filing Fee &
Certificate of Status ☐ \$155 Filing Fee &
Certified Copy ☐ \$160 Filing Fee.
(additional copy is enclosed) 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
PO Box 6327
Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

AGA Associates, LLC

ARTICLE II - Address:

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

Principal Office Address:

377 N Lake Way

Palm Beach, Florida 33480

Mailing Address:

377 N Lake Way

Palm Beach, Florida 33480

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

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

Alan L. Shulman

Name

377 N Lake Way

Florida street address (P.O. Box NOT acceptable)

Palm Beach, Florida 33480

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, F.S.

Registered Agent's Signature

(CONTINUED)

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FILED

2005 DEC 21 A 10: 5
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**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:MGRAlan L. Shulman377 N Lake WayPalm Beach, Florida 33480MGRAlex Grass4025 Crooked Hill RoadHarrisburg, Pennsylvania 17110MGRGeorge Ross1116 Barberry RoadBryn Mawr, Pennsylvania 19010

(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.)

Alan L. Shulman

Typed or printed name of signer

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)