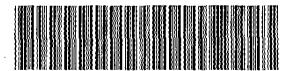
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ACCOUNT NO. : 072100000032

REFERENCE: 897876 7521936

AUTHORIZATION :

COST LIMIT :

ORDER DATE: March 2, 2006

ORDER TIME : 3:01 PM

ORDER NO. : 897876-010

CUSTOMER NO: 7521936

DOMESTIC FILING

NAME:

FIRST STATES INVESTORS 3263,

LLC

EFFECTIVE DATE:

	CERTIFIC	CATE OF I	IMITED	PARTNE	RSHIP	
PLEASE	RETURN T	THE FOLLO	WING A	S PROOF	OF FILING	:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACT	PERSON:	Amanda	Haddaı	n - EXT	. 2955	

EXAMINER'S INITIALS:

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MEANE STATES ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY C ARTICLE I - Name: The name of the Limited Liability Company is: FIRST STATES INVESTORS 3263, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 1725 THE FAIRWAY 1725 THE FAIRWAY JENKINTOWN, PA 19046 JENKINTOWN, PA 19046 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street

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..

City, State, and Zip

Tallahassee

Florida street address (P.O. Box <u>NOT</u> acceptable)
Florida street address (P.O. Box <u>NOT</u> acceptable)

Corporation Service Company

By: Challette Shmeanny

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

The name and address of each Mana	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	NICHOLAS S. SCHORSCH
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
ASST. MGR	GLENN BLUMENTHAL
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
ASST. MGR	EDWARD J. MATEY IR.
	1725 THE FAIRWAY
	IENKINTOWN, PA 19046
ASST. MGR	Sonya A. Huffman
	1725 THE FAIRWAY
	JENKINTOWN, PA 19046
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) se specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	mating La
,	er or an authorized representative of a member.
(In accordance with se of this document const that the facts stated to the facts state	ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)

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

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)

By: EDWARD J. MATEY JR., ASSISTANT MANAGER

Typed or printed name of signes

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY (ADDENDUM)

For FIRST STATES INVESTORS 3263, LLC

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

MGR

DAVID J. NETTINA 1725 THE FAIRWAY JENKINTOWN, PA 19046

EDWARD J. MATZY JR., AUTHORIZED REPRESENTATIVE