L06000025744

(Requestor's Name)	_
(Address)	-
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
Office Use Only	



500066868075

11/2 | 24/2 | 24/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21/2 | 21

RECESTED

06 MAR 10 AM 8: 4



ACCOUNT NO. : 072100000032

REFERENCE: 911645

_ 125014A

AUTHORIZATION : (

COST LIMIT : \$125.00

ORDER DATE: March 9, 2006

ORDER TIME : 4:44 PM

ORDER NO. : 911645-005

CUSTOMER NO: 125014A

DOMESTIC FILING

NAME: MJH REALTY, LLC

EFFECTIVE DATE:

XX ___ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Pollye Janisse - EXT. 2954

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
• • •	
_MJH Realty, LLC	
(Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L,C,")
• • •	
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
The maxing addition and short addition of the pr	morphi office of the Emmed Entermy Company is,
Principal Office Address:	Mailing Address:
I Inicipal Office Address:	Maning Address:
262 Eagleton Estates Blvd.	262 Earlaton Estaton Plyd
Palm Beach Gardens, FL 33418	262 Eagleton Estates Blvd.
Tain Doddi Caldella, I E 334 10	Palm Beach Gardens, FL 33418 Office, & Registered Agent's Signature:
	三十二
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registr	ered Agent. You must designate an individual or another
business entity with an active Florida registration.)	mc =
The same and the Blacks short all as and	suistered agent are:
The name and the Florida street address of the re	egistered agent are:

- 1011aa ba -- taatioba of alo topicator apont ato.

Corporation Service Company
Name

1201 Hays Street

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

Tallahassee, FL 32301
City, State, and Zlp

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 (REQUITED)

Laura R. Dunlap as its agent

(CONTINUED) Page 1 of 2

The name and address of each Mann	ager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Michael J. Hastings 1301 W. Butler Pike Blue Bell, PA 19422
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the figure of the date is listed, the date must of or 90 days after the date of filing.)	te date of filing: (OPTIONAL) be specific and cannot be more than five business days price
REQUIRED SIGNATURE:	
Signature of a memi	ber or an authorized representative of a member,
(In accordance with s of this document con	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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)

Page 2 of 2