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PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		3/24/
	Office Use Only	



FF \$105

COVER LETTER

TO:

Registration Section Division of Corporations SUBJECT: RMJP 76th Street, LLC (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Stuart R. Lundy, Esquire, Authorized Representative Lundy, Flitter, Beldecos & Berger, P.C. 450 N. Narberth Avenue (Address) Narberth, PA 19072 (City/State and Zip Code) For further information concerning this matter, please call: Stuart R. Lundy, Esquire (Name of Person) (Area Code & Daytime Telephone Number) Anclosed is a check for the following amount: ■ \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address Street/Courier Address Registration Section Registration Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RMJP 76TH STREET, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

c/o Paula Rapoport Katz, 901 Artis Road	c/o Paula Rapoport Katz, 901 Artis Road
Plymouth Meeting, PA 19462	Plymouth Meeting, PA 19462
	<u> </u>
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Region business entity with an active Florida registration.) The name and the Florida street address of the Martha Lemus	stered Agent. You must designate an individual or afformer
Name Name	
10409 North Florida A	

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

legistered Agent's Signature (REOF RED

Tampa, FL 33612-6708

(CONTINUED)
Page 1 of 2

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

Title.

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

Title: "MGR" = Manager -	Name and Address:		
"MGRM" = Managing Member			
Manager	Paula Rapoport Katz		
	901 Artis Road		
	Plymouth Meeting, PA 19462	-	
Manager	Jeffrey Rapoport		
	458 N. Appletree Lane		
	Lafayette Hill, PA 19444	_	
	<u> </u>		
	SS T	?	
(Use attachment if necessary)	FLOAR	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
LE V: Effective date, if other than the	ne date of filing: (OP#10		
	be specific and cannot be more than five business	days	
days after the date of filing.)			

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.)

STUART R. LUNDY, ESQUIRE, ATTORNEY Typed or printed name of signee

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)