

Division of Corporations

Page 1 of 1

L06000039404

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000100480 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

RECEIVED

06 APR 14 AM 11:45

DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 APR 14 AM 9:07

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.**ATHENA PALAFOX, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION
OF
ATHENA PALAFOX, LLC**

In compliance with Section 608.407, Florida Statutes, the following is submitted to form a limited liability company in Florida.

FIRST. The name of the limited liability company formed hereby is Athena Palafox, LLC.

SECOND. The mailing address and the street address of the principal office of the limited liability company is 100 Mill Plain Road, 3rd Floor, Danbury, Connecticut 06811.


THIRD. The name and address of the registered agent of the limited liability company in the State of Florida is C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.

FOURTH. The name and address of the Manager is as follows:

<u>Title</u>	<u>Name and Address</u>
Manager	Richard J. O'Brien 100 Mill Plain Road, 3 rd Floor Danbury, CT 06811

FIFTH. 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.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on the 15th day of April 2006.


Name: Robert W. Dockery
Title: Organizer

FILED
06 APR 14 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF REGISTERED AGENT

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.

C T CORPORATION SYSTEM

By: Connie Bryan
Name: CONNIE BRYAN
Title: SPECIAL ASSISTANT SECRETARY

Robert W. Dockery
Robert W. Dockery
Authorized Person

FILED
06 APR 14 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA