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SECRETARY OF STATE

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COVER LETTER

TO: Registration Se Division of Co			,
SUBJECT: CHANG		LENDING GROUP, LL ed Liability Company)	<u>C</u>
The enclosed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Corporation		nerica, Inc., c/o Rya Name of Person)	an D. Bailine, Esq.
SHUTTS &	BOWEN, LLP		
		(Firm/Company)	,
201 SOUT	H BISCAYNE BOL	ULEVARD - 15th Flo	oor
		(Address)	
MIAMI, FL	ORIDA 33131		
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Ryan D. Bailin	e Esa	at (305) 347-735	4
	of Person)	at (303) 347-7354 (Area Code & Daytime To	
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:



CHANDLER'S MEADOWS LENDING GROUP, 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:	
Suite 108	Suite 108	
300 Lancaster Avenue	300 Lancaster Avenue	
Wynnewood, PA 19096	Wynnewood, PA 19096	
	·	

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:

Ryan D. Bailine, Esq.
Name
201 SOUTH BISCAYNE BOULEVARD - 15th Floor
Florida street address (P.O. Box NOT acceptable)
MIAMI, FLORIDA 33131 FL
City State and Zin

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 (REQUIRED)

(CONTINUED) Page 1 of 2 SECRETARY OF STATE

APP(Qy(E)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Mem	her
managing men	
MGRM	Rodney H. Green
	Suite 108 - 300 Lancaster Pike
	Wynnewood, PA 19096
Member	East River Holdings, Inc.
	5822 Davon Street
	Jacksonville, FL 32244
	•
(Use attachment if necessary	1
(Ose attachment if necessary)
LEV: Effective date if other	than the date of filing: June 23, 2006 (OPTIONAL
	e must be specific and cannot be more than five business days
days after the date of filing.	
REQUIRED SIGNATURE	:
100	
, – – –	

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.)

Ryan D. Bailine, Esq., Registered Agent

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)

