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(Re	equestor's Name)
(Ac	ddress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:





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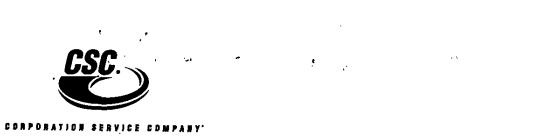
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ACCOUNT NO. : 072100000032
REFERENCE: 689712 4804484 AUTHORIZATION: COST LIMIT: \$125.00
AUTHORIZATION:
COST LIMIT: \$ 125.00
ORDER DATE: December 28, 2006
ORDER TIME: 2:44 PM
ORDER NO. : 689712-015
CUSTOMER NO: 4804484
DOMESTIC FILING
NAME: PMC/STAURT DEVELOPER, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Doreen Wallace - EXT. 2928
FXAMINER'S INITIALS.

ARTICLE I - N	amar	THE STATE OF THE S
	Limited Liability Co.	mpany is:
PMC/ORLANDO I	•	
Must end with the wo	rds "Limited Liability Com	pany, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - A	Address:	
		s of the principal office of the Limited Liability Company is
Principal Office	Address:	Mailing Address:
1411 Walnut Street	t	1411 Walnut Street
Philadelphia, PA 19	9102	Philadelphia, PA 19102
ARTICLE III -	Registered Agent	Registered Office & Registered Agent's Signature:
(The Limited Liability	y Company cannot serve as	Registered Office, & Registered Agent's Signature:
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratio	its own Registered Agent. You must designate an individual or another n.)
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratio	its own Registered Agent. You must designate an individual or another
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratio	its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are:
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratio ne Florida street addre	its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are:
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratione Florida street addresser Daniel K. Rothschild	its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are: Name Penue, Suite #456
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratione Florida street addresser Daniel K. Rothschild	its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are: Name
(The Limited Liability business entity with	y Company cannot serve as an active Florida registratione Florida street addresser Daniel K. Rothschild	its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are: Name Penue, Suite #456
(The Limited Liability business entity with	y Company cannot serve as an active Florida registration re Florida street address Daniel K. Rothschild 123 SE 3rd Av Flor	its own Registered Agent. You must designate an individual or another n.) ess of the registered agent are: Name Venue, Suite #456 ida street address (P.O. Box NOT acceptable)

(CONTINUED)
Page 1 of 2

Daniel K. Rothschild

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>litle:</u>	Name and Address:
MGR" = Manager	•
MGRM" = Managing Men	1ber
MGRM	Ronald L. Caplan
inokii.	1411 Walnut Street
	Philadelphia, Pa 19102
	1 massyria, 1 a 7770a
	• •
LE V: Effective date, if oth	er than the date of filing: (OPTION the must be specific and cannot be more than five business d
LE V: Effective date, if oth fective date is listed, the date days after the date of filin	er than the date of filing: . (OPTION the must be specific and cannot be more than five business d g.)
LE V: Effective date, if oth fective date is listed, the date days after the date of filin	er than the date of filing: . (OPTIOI te must be specific and cannot be more than five business of g.)
fective date is listed, the date days after the date of filin REQUIRED SIGNATUR Signature (In accord of this doc that the	er than the date of filing:
LE V: Effective date, if oth fective date is listed, the date days after the date of filin REQUIRED SIGNATUR Signature (In accord of this doc that the	er than the date of filing:
LE V: Effective date, if oth fective date is listed, the date days after the date of filin REQUIRED SIGNATUR Signature (In accord of this doc that the By: Rohald is	er than the date of filing:
LE V: Effective date, if oth fective date is listed, the date days after the date of filing REQUIRED SIGNATUR Signature (In accord of this doe that the By: Rohald is	er than the date of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)