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(Req	uestor's Name)	
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(City)	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Na	me)
(Doc	ument Number)	)
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B. KOHR

SEP 1 7 2009

**EXAMINER** 

09 SEP 16 AM 8: 12



ACCOUNT NO. : 12000000195	20 15 15 C
REFERENCE : 127092 7420546	SES
AUTHORIZATION :	6
COST LIMIT: \$125.00	چ 
ORDER DATE : September 16, 2009	
ORDER TIME : 3:46 PM	
ORDER NO. : 127092-005	
CUSTOMER NO: 7420546	
	. <b></b>
DOMESTIC FILING	
NAME: 111 DEBT PALM BEACH 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: Carina L. Dunlap - EXT. 2951	
EXAMINER'S INITIALS:	

ARTICLE I - Name:	95.E
The name of the Limited Liability Compa	any is:
111 Debt Palm Beach LLC	
(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7 Bulfinch Place, Suite 500	7 Bulfinch Place, Suite 500
Boston, MA 02114	Boston, MA 02114
business entity with an active Florida registration.)	
The name and the Florida street address o  Corporation Service	
The name and the Florida street address o  Corporation Service	ee Company
The name and the Florida street address of Corporation Service  1201 Hays Street	ee Company
The name and the Florida street address of Corporation Service  1201 Hays Street Florida str	name  reet address (P.O. Box <u>NOT</u> acceptable)
The name and the Florida street address of Corporation Service  1201 Hays Street Florida str	name
The name and the Florida street address of Corporation Service  1201 Hays Street Florida street Tallahassee  City,  Having been named as registered agent at liability company at the place designative registered agent and agree to act in this constatutes relating to the proper and comp	name  reet address (P.O. Box <u>NOT</u> acceptable)

(CONTINUED) Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGMR 111 Debt Acquisition Holdings LLC (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 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.) Typed or printed name of signee Filing Fees:

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

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)