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DEPT. OF REVENUE  
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TALLAHASSEE, FLORIDA

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T. HAMPTON

FEB - 2 2010

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 270643 4720431

AUTHORIZATION :

*[Handwritten signature]*

COST LIMIT : \$ 125.00

ORDER DATE : February 1, 2010

ORDER TIME : 3:14 PM

ORDER NO. : 270643-005

CUSTOMER NO: 4720431

DOMESTIC FILING

NAME: LANE BRYANT OUTLET #4146, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

LANE BRYANT OUTLET #4146, LLC

(Must end with the words "Limited Liability Company "LLC" "or "LLC")

**ARTICLE II - Address:**

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

**Principal Office Address:**

3750 STATE ROAD

BSC TAX DEPT

BENSALEM, PA 19020

**Mailing Address:**

3750 STATE ROAD

BSC TAX DEPT

BENSALEM, PA 19020

**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:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P O Box **NOT** acceptable)

Tallahassee

FL 32301

City, State, and Zip

*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.*

Corporation Service Company

BY:

Elizabeth R. Konieczny  
Registered Agent's Signature (REQUIRED)

Elizabeth R. Konieczny, Asst. Vice President

(CONTINUED)

Page 1 of 2

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

SOLE MEMBER

OUTLET DIVISION STORE CO., INC.  
3750 STATE ROAD  
BENSALEM, PA 19020

MGR

WILLIAM R. DAWSON  
3750 STATE ROAD  
BENSALEM, PA 19020

MGR

JOHN J. SULLIVAN  
3750 STATE ROAD  
BENSALEM, PA 19020

MGR

KATHLEEN H. LIEBERMAN  
3750 STATE ROAD  
BENSALEM, PA 19020

(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:**

OUTLET DIVISION STORE CO, INC.

Kathleen H. Lieberman  
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.)

KATHLEEN H. LIEBERMAN, VICE PRESIDENT  
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)

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MGR

STEVEN R. WISHNER  
3750 STATE ROAD  
BENSALEM, PA 19020

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