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SECRETARY OF STATES
TALL AHASSEF, EL OBIDA

J. SAULSBERRY EXAMINER FEB 14 2011

COVER LETTER

TO:	Registration S Division of Co				
SUBJ	_{ECT:} 51520	6chesternj, LLC.			
		Name of Limited	Liability Company		
The er	nclosed Articles of	f Organization and fee(s) are su	bmitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
	joseph pa				
		N	lame of Person		
		I	irm/Company		
	16 o grod	anhrook rd		20 (A)	
	To e. gree	enbrook rd.	Address	2011 FEB SECRETA ALLAHAS	
			1,433,531	EB 1 RETARY HASSI	. 1
	north caldw			SSE Y	-
		City/	State and Zip Code	PH I	IT
	joe@pannul				_ (
		E-mail address: (to be used for	future annual report notification)	SE 9	
For fu	rther information	concerning this matter, please of	call:	- .	
joe (pannullo		at (2012474700		
	Name o	of Person	Area Code & Daytime Telep	ohone Number	
P1-	d :	andha Callanina amanut			
_		or the following amount:	_	_	
]\$125.0	O Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Mailing Address	Street/Courier Address		
		Registration Section Division of Corporations	Registration Section Division of Corporations		
		P.O. Box 6327	Clifton Building		
		Tallahassee, FL 32314	2661 Executive Center C	ircle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	:			
515206CHESTERNJ, LLC.				
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Lia	bility Company	y is:	
Principal Office Address:	Mailing Address: 16 E GREENBROOK ROAD NORTH CALDWELL, NJ 07006			
16 E GREENBROOK ROAD NORTH CALDWELL, NJ 07006				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	d Office, & Registered Agent's stered Agent. You must designate an individ	Signature: ual of Properties 20 F		
The name and the Florida street address of the	registered agent are:	FEB II	and the same	
cl south associates, llo	;	RY =		
Name		. 유 구 유		
5314 boca marin	a circle north	STATE LORIO		
Florida street ad	dress (P.O. Box NOT acceptable)	9m 9		

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

boca raton

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member mgrm joseph pannullo 16 e. greenbrook rd. n. caldwell, nj 07006 (Use attachment if necessary) _. (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (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:** 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) joseph pannullo 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)