Division of Corporations Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO.

CF Holding Company, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

HelpJ. BRYAN

AUG -9 2012

https://efile.sunbiz.org/scripts/efilcovr.exe

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CT CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY. ARTICLE I - Name: The name of the Limited Liability Company is: CP Holding Company, 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: Mailing Address:

201 Oranite Run Drive, Suite 290

Lancaster, PA 17601

Lancaster, PA 17601

Lancaster, PA 17601

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot zerve as its own Registered Agent. You must designed an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

C T Corporation System

Name

1200 South Pine Island Road

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

Plantation PL 33324

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..

Registered Agent's Signature (REQUIRED)
ANN JWILLIAMS
Assistant Vice President
(CONTINUED)

Page 1 of 2

PLBS2 - 04/12/2011 C'T System Online

Title: "MGR" = Manager	naging Member(s): ager or Managing Member is as follows: Name and Address: Cary H. Gregory
"MGRM" = Managing Member	
MGRM	Cary H. Gregory
	663 Goosanock Drive
	Lititz, PA 17543
	,
	
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(Use attachment if necessary)	
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LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of the feeting of the constitutes an affirmation under lam aware that any faite inforce.	or or an authorized representative of a member. 3.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, notice submitted in a document to the Department of State.
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of the feeting of the constitutes an affirmation under lam aware that any faite inforce.	or or an authorized representative of a member.

5 30.00 Certified Copy (Optional)
5 5.00 Certificate of Status (Optional)

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