## L14000097541

(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	
(Docun	nent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filin	ng Officer:	
,		

Office Use Only



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RECEIVED
DEWATHERT OF STATE

B. BOSTICK
JUN 1 8 2014
EXAMINER



An ornalor comitant		
ACCOUNT NO. : 12000000195		
REFERENCE: 178757 4300426		
AUTHORIZATION :		
COST LIMIT : \$ 125.00		
ORDER DATE : June 16, 2014		
ORDER TIME : 4:06 PM		
ORDER NO. : 178757-005		
CUSTOMER NO: 4300426		
DOMESTIC FILING		
NAME: PRINCETON PRIME NORTH, LLC		
	. •	
EFFECTIVE DATE:	Cost Cost Aprile	,
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP		ي يا در يا در يا
XX ARTICLES OF ORGANIZATION		i ranjing
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		٠
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	Total (1)	
CONTACT PERSON: Emily Gray - EXT. 62925		
FYAMTNED/C TNTTTALC.		

## COVER LETTER

	egistration Section ivision of Corporations	
CUD ICCT	Princeton Prime North, LLC	
SUBJECT		imited Liability Company
The enclose	ed Articles of Organization and fee(s)	are submitted for filing.
Please retu	rn all correspondence concerning this i	natter to the following:
	Cameron Brown	
		Name of Person
	Winston and Strawn LLP	
		Firm/Company
	200 Park Avenue	
		Address
	New York, NY 10166	
	csbrown@winston.com	City/State and Zip Code
	E-mail address:	(to be used for future annual report notification)
For further	information concerning this matter, ple	ease call:
Cameron	Brown at (	212 294-5306
	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
]\$125. <b>00</b> Fil	ling Fee \$\int \text{\$130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Princeton Prime North, LLC	
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
110 Fieldcrest Avenue	110 Fieldcrest Avenue
Suite 25	Suite 25
Edison, NJ 08837	Edison, NJ 08837
another business entity with an active Florida re	raistentian )
	•
The name and the Florida street address of the reNRAI Services, Inc.	egistered agent are:
	•
	egistered agent are: Name
NRAI Services, Inc.  1200 South Pine Islan	egistered agent are: Name
NRAI Services, Inc.  1200 South Pine Islan	egistered agent are:  Name  nd Road
1200 South Pine Islar Florida street address (	Name  nd Road  P.O. Box NOT acceptable)

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 605, F.S..

NRAI Services, Inc.

ASIT Secretary Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>litle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
Manager	Lee Maschler
	110 Fieldcrest Avenue, Suite 25
	Edison, NJ 08837
V: Effective date, if other than the dative date is listed, the date must be s	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 9
V: Effective date, if other than the dative date is listed, the date must be s filing.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 9
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V: Effective date, if other than the dative date is listed, the date must be sfiling.)  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a.m.  (In accordance with section constitutes an affirmation I am aware that any false in the section of the	ember or an authorized representative of a member.
V: Effective date, if other than the dative date is listed, the date must be sfiling.)  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a m (In accordance with section constitutes an affirmation I am aware that any false i constitutes a third degree	ember or an authorized representative of a member.  1605.0203 (1) (b), Florida Statutes, the execution of this documen under the penalties of perjury that the facts stated herein are true.  1605.0203 (1) (b) and the facts stated herein are true.
V: Effective date, if other than the dative date is listed, the date must be s filing.)  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a.m.  (In accordance with section constitutes an affirmation I am aware that any false in the section constitutes and affirmation I am aware that any false in the section constitutes and affirmation I am aware that any false in the section constitutes and affirmation I am aware that any false in the section constitutes and affirmation I am aware that any false in the section constitutes and affirmation I am aware that any false in the section constitutes are affirmation.	ember or an authorized representative of a member.  1605.0203 (1) (b), Florida Statutes, the execution of this documen under the penalties of perjury that the facts stated herein are true.  1605.0203 (1) (b) and the document to the Department of State of the Depar
V: Effective date, if other than the dative date is listed, the date must be sfiling.)  VI: Other provisions, if any.  EOUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false i constitutes a third degree	ember or an authorized representative of a member.  605.0203 (1) (b), Florida Statutes, the execution of this documen under the penalties of perjury that the facts stated herein are true.  610 or an authorized representative of a member.  62 or an authorized representative of a member.  63 or an authorized representative of a member.  64 or an authorized representative of a member.  65 or an authorized representative of a member.  66 or an authorized representative of a member.  66 or an authorized representative of a member.  66 or an authorized representative of a member.  67 or an authorized representative of a member.  68 or an authorized representative of a member.  69 or an authorized representative of a member.  69 or an authorized representative of a member.  60 or an authorized representative of a member.

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