

Division of Corporations

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Florida Department of State  
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To:

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Fax Number : (850) 617-6383

From:

Account Name : BRANT, ABRAHAM, REITER & MCCORMICK, P.A.  
Account Number : I20040000043  
Phone : (904) 358-2750  
Fax Number : (904) 353-1166

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**FLORIDA LIMITED LIABILITY CO.  
Poconos Whispering Pines, LLC**

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**ARTICLES OF ORGANIZATION  
OF  
Poconos Whispering Pines, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, *Florida Statutes* Chapter 605 (the "Act"), hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I - NAME**

The name of the limited liability company shall be Poconos Whispering Pines, LLC (the "Company").

**ARTICLE II - ADDRESS**

The principal and mailing address of the Company is 541 Oriole Lane, Villanova, Pennsylvania 19085.

**ARTICLE III - DURATION**

The Company shall commence its existence upon the filing of these Articles by the Department of State. The Company's existence shall be perpetual unless the Company is sooner terminated as provided in the Operating Agreement of the Company, if any, or as provided under applicable law.

**ARTICLE IV - REGISTERED OFFICE AND AGENT**

The name and street address of the registered agent of the Company in the state of Florida is Brant, Abraham, Reiter, McCormick & Johnson, P.A., 50 North Laura Street, Suite 2750, Jacksonville, Florida 32202.

**ARTICLE V - MANAGEMENT**

The Company shall be managed by a Manager to be appointed by the Member(s) of the Company from time to time in accordance with the terms of the Operating Agreement of the Company, if any, and/or the Act.

**IN WITNESS WHEREOF**, the undersigned authorized representative has made and subscribed these Articles of Organization for the foregoing uses and purposes.

Executed by the undersigned organizer on the 13<sup>th</sup> day of March, 2015.

Amy H. Johnson, Esq.  
Amy H. Johnson, Esq.  
Authorized Representative

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Under the provisions of *Florida Statutes* §605.0113 Poconos Whispering Pines, LLC, submits the following statement to designate a registered office and registered agent in the State of Florida:

1. The name of the limited liability company is Poconos Whispering Pines, LLC
2. The name and street address of the registered agent in Florida is:

Brant, Abraham, Reiter, McCormick & Johnson, P.A.  
50 North Laura Street, Suite 2750  
Jacksonville, Florida 32202

The undersigned, being the person named in the Articles of Organization of Poconos Whispering Pines, LLC, as the registered agent of this limited liability company, hereby consents to accept service of process for the above-stated Company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accepts the obligations of the position of registered agent.

Brant, Abraham, Reiter, McCormick &  
Johnson, P.A.

By:

Amy H. Johnson

Its:

Vice-President

"Registered Agent"

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