

**L9800000-1546**

Requestor's Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Phone # **877-8237**

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 98 AUG 21 PM 2:05

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

RECEIVED  
 98 AUG 21 PM 1:25  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

- Walk in     Pick up time **3:30**     Certified Copy  
 Mail out     Will wait     Photocopy     Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

**400002622314--5**  
 -08/21/98--01091--011  
 \*\*\*\*346.25 \*\*\*\*346.25

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**(4)**  
*Handwritten signature*

Examiner's Initials \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 AUG 21 PM 2:05

**ARTICLES OF ORGANIZATION  
OF  
PENNSYLVANIA PLACE, L.C.**  
(A Florida Limited Liability Company)

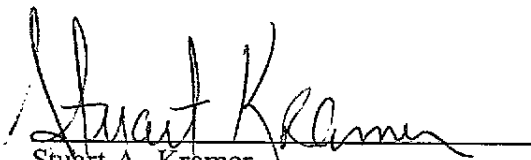
The undersigned natural person of the age of eighteen years or more, acting as organizer of a limited liability company under the Limited Liability Company Act of the State of Florida, hereby adopts the following Articles of Organization for such limited liability company.

1. The name of the limited liability company is: **Pennsylvania Place, L.C.**
2. The mailing address and street address of the principal office of the limited liability company is: 3100 Clay Avenue, Suite 275, Orlando, Florida 32804.
3. The period of duration for the limited liability company shall be perpetual.
4. The limited liability company is to be managed by the members, and the names and addresses of the managing members are:

Stuart A. Kramer	Dwayne R. Hamner	Sumner Kramer
1540 Glencoe Road	1160 Willowbrook Trail	851 Georgia Avenue
Winter Park, FL 32789	Maitland, FL 32751	Winter Park, FL 32789

5. Upon a dissolution event set forth in Section 608.441(1)(c), Florida Statutes, the limited liability company may continue its business upon the consent of the members owning a majority of its membership units.

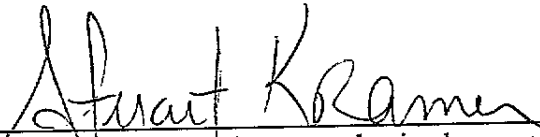
**IN WITNESS WHEREOF**, the undersigned has executed these Articles of Organization of Pennsylvania Place, L.C., this 20th day of August, 1998, on behalf of the parties who shall be its members.

  
Stuart A. Kramer

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**

The undersigned member or authorized representative of a member of Pennsylvania Place, L.C. deposes and says:

- |    |  |               |
|----|--|---------------|
| 1) | The total amount of cash contributed by the member(s) is                         | \$ 100,000.00 |
| 2) | If any, the agreed value of property other than cash contributed by member(s) is | \$ -0-        |
| 3) | The amount of cash or property anticipated to be contributed by member(s) is     | \$ -0-        |
| 4) | The total amounts of 2, 3, and 4 is  | \$ 100,000.00 |

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
AUG 21 PM 2:05

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 AUG 21 PM 2:05

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1) The name of the limited liability company is: **Pennsylvania Place, L.C.**
- 2) The name and address of the registered agent and office is:

F&L Corp.  
The Greenleaf Building  
Third Floor, 200 Laura Street  
Jacksonville, FL 32201-0240

*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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

F & L Corp.,  
a Wisconsin corporation



John A. Sanders, As Agent and  
Authorized Signatory