## Florida Department of State

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Account Number : 075350000132 Phone

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ALI

## LIMITED LIABILITY COMPANY

PLC Holdings II, L.C.

14 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -	SEREMBER II. PRINTERNAMENTAL
Certificate of Status	11
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00



FAX AUDIT NO. H01- 19597

## ARTICLES OF ORGANIZATION OF PLC HOLDINGS II, L.C., a Florida limited liability company

- 1. The name of the limited liability company is PLC Holdings II, L.C. (the "Company").
- The mailing and street address of the principal office of the Company is c/o Lowell Potiker, 3366 North Torrey Pines Court, Suite 210, La Joya, California 92037.
- The name and street address of the initial registered agent of the Company are:

C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324.

The Company will be a manager-managed limited liability company.

Dated: as of February 26, 2001.

By: Words Ray Deborah R. Mayo, Authorized Representative

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Fax Audit No. H01-19597 ·

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OF-FICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability	company	is: PLC Ho	ldings []	<u>,</u> L.C.
2. The name and address of the registered agent and	office is:			W Z
C T CORPORATION SYSTEM	M		:	
(Name)	4.4			ASS
c/o C T CORPORATION SYSTEM	, 1200 Sc	outh Pine	Island	Road
(P.O. Box not revert				FLC
Plantation, FL	33324			RIC
(Chy/State/Zip)	· · · · · · · · · · · · · · · · · · ·		•	A
Having been named as registered agent and to as stated limited liability company at the place designathe appointment as registered agent and agree to comply with the provisions of all statutes relating to of my duties, and I am familiar with and accept the agent.  C T CORPORATION SYSTEM	ated in this c actin this c the proper a	ertificate, I i apacity. I fu and complete f my position	nereby acc riner agred performa	ept e to nce
(Signature) PETER F. SOUZA ASSISTANT SECRETARY		(Date)		

FILING FEE: \$ 35 for Designation of Registered Agent

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