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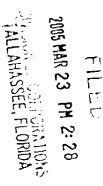
(Requestor's Name)		
(Address)		
(Address)		
(City	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
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J. STYNN MAR 2 5 2005

TRANSMITTAL LETTER				
TO: Registration Section Division of Corporations	STAR O			
SUBJECT: Pinter and Co 14.4C. (Name of Limited Liability Company)	ASSER, FLORI			
(Tame of Emilian Empling Company)	FLOOR 2: 2			
The enclosed Articles of Organization and fee(s) are submitted for filing.	ALLONS OF			
Please return all correspondence concerning this matter to the following:				
Christopher Pinter				
Pinter and Co, Inc L	.L.C.			
1814 NE 17th ter (Address)				
Cape Coral FL 33909 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Christopher Pinter at (239) 458-90 (Name of Person) (Area Code & Daytime Telepho	)70			
(Table 50.7 61551)	,			
Enclosed is a check for the following amount:				
Certificate of Status Certified Copy Ce (additional copy is enclosed) Certified Copy	\$160.00 Filing Fee, ertificate of Status & ertified Copy Iditional copy is enclosed)			

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 16, 2005

CHRISTOPHER PINTER PINTER AND CO., INC L.L.C. 1814 NE 17TH TERRACE CAPE CORAL, FL 33909

SUBJECT: PINTER AND COMPANY, INC L.L.C.

Ref. Number: W05000013669

We have received your document for PINTER AND COMPANY, INC L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "INC.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 205A00018070



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
$\wp_i$	nter and Co. L.L.C.
0.	
inter and com	pany, Inc Lile
·	( )
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:
Tincipal Office Address.	Maining Additess.
1914 NE17+470C	1814 NE174 tor
1814 NE17+hTer Cape Goral FL 33909	Can Carel FL 33909
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the r	egistered agent are:
Charalaka	Protes (P.O. Box NOT acceptable)  1 229016
- VIII 15 TO PREC	TATES 3
	AR 2
1814NEI7thTer	AS:
Florida street add	Iress (P.O. Box NOT acceptable)
	220AC TO TO
Cape Coral City, State, 8	FL 33909 FOR 2: und Zip 2:
City, State, 8	Ref 25
Having been named as registered agent and to	accept service of process for the above stated limited
liability company at the place designated in t	his certificate. I hereby accept the appointment as

Registered Agent's Signature

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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Christopher Pinter 1814 NEI 7th Ter Cape Coral FL 33909
MCRM	Amy Piater 1814 NEI 7th ter Cape Grad Ft 33909
	2005
(Use attachment if necessary)	added if an effective date is requested.
NOTE: An additional article must be a	added if an effective date is requested. FLORATION 2: 29
- Ally	Katis
(In accordance with section	an authorized representative of a member.  608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)
My Fryped c	INKR or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)