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SECRETARY OF STATE

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ION SERVICE COMPANY.	
ACCOUNT NO.: 072100000032	
REFERENCE : 590399 162947A	1
AUTHORIZATION: Toticia tiput	
COST LIMIT: \$ 125.00	
ORDER DATE: September 12, 2005	3. J.
ORDER TIME : 10:39 AM	OF
ORDER NO. : 590399-015	·
CUSTOMER NO: 162947A	
DOMESTIC FILING	
NAME: PEER EIGHT LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	- -
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	 - -
CONTACT PERSON: Darlene Ward - EXT. 2935	
EXAMINER'S INITIALS:	



ARTICLE I - Name:



The name of the Limited Liability Company is:	
PEER EIGHT LLC	
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
13515 N.W. 8th Court	Same .
Sunrise, FL 33325	
ARTICLE III - Registered Agent, Registered Office	& Pagistared Agent's Signature
The name and the Florida street address of the registere	
Eugene Tornambe	
Name	

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 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, Florida Statutes..

City, State, and Zip

Florida street address (P.O. Box NOT acceptable)

FLORIDA 33325

Registered Agent's Signature

13515 N.W. 8th Court

Sunrise

Page 1 of 2 (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:
MGRM	Eugene Tornambe
	13515 N.W. 8th Court
	Sunrise, FL 33325
Name to the same to the same that the same that the same that the same to the	
>	
(Use attachment if necessary)	·
NOTE: An additional article mu	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	
9	7
me lu	
Signature of a member of	or an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herein	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury a are true.)
By: Eugene Torn	ambe
	d or printed name of signee

- Filing Fees:
 \$100.00 Filing Fee for Articles of Organization
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)