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Account Name : BROAD AND CASSEL-TAMPA

Account Number: 120080000032 Phone: (813)225-3028 Fax Number: (813)204-2130

AHASSEE, PLORIDA

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

## P&R Investors, LLC

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**EXAMINER** 



100 NORTH TAMPA STREET
SUITE 3500
TAMPA, FLORIDA 33602
P.O. BOX 3310 (33601-3310)
TELEPHONE: 813.225.3020
FACSIMILE: 813.225.3039
www.broadandcassel.com

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Margaret Weaver

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41508-0001

#### MESSAGE:

Articles of Organization for P&R Investors, LLC for filing. H08000130700 3

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## **COVER LETTER**

	TO: Registration Section Division of Corporations
	SUBJECT: P&R Investors, LLC
	(Name of Limited Liability Company)
	The enclosed Articles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	Mark Barber, Esquire
	(Name of Person)
	Broad and Cassel
	(Firm/Company)
	100 N. Tampa Street, Suite 3500
	(Address)
	Tampa, FL 33602
	(City/State and Zip Code)
	For further information concerning this matter, please call:
	Margaret Weaver, Paralegal at ( 813 ) 225-3022
	(Name of Person) (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
}	T\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Bascutive Center Circle Tallahassee, FL 32301

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Broad and Cassel->

P&R Investors, LLC		
	the words "Limited Liability Company, "L.L.C.," or "LLC.")	•
ARTICLE II - Address: The mailing address and str	eet address of the principal office of the Limited Liability Company is	:
Principal Office Address:	Malling Address:	
9035 Hogans Bend Tampa, FL 33847	9035 Hogans Bend Tampa, FL 33647	
	Agent, Registered Office, & Registered Agent's Signature: not serve as its own Registered Agent. You must designate an individual or another a registration.)	08
(The Limited Liability Company can business entity with an active Florid	Agent, Registered Office, & Registered Agent's Signature: lot serve as its own Registered Agent. You must designate an individual or another	OB MAY
(The Limited Liability Company can business entity with an active Florida The name and the Florida st	Agent, Registered Office, & Registered Agent's Signature: not serve as its own Registered Agent. You must designate an individual or another a registration.)	08 MAY 15
(The Limited Liability Company can business entity with an active Florida The name and the Florida st	Agent, Registered Office, & Registered Agent's Signature: sot serve as its own Registered Agent. You must designate an individual or another a registration.) reet address of the registered agent are:	25
(The Limited Liability Company can business entity with an active Florida St.  The name and the Florida st.  Mark	Agent, Registered Office, & Registered Agent's Signature: not serve as its own Registered Agent. You must designate an individual or another a registration.) reet address of the registered agent are: M. Barber, Esquire	15 AM
(The Limited Liability Company can business entity with an active Florida St.  The name and the Florida st.  Mark	Agent, Registered Office, & Registered Agent's Signature: sot serve as its own Registered Agent. You must designate an individual or another a registration.)  reet address of the registered agent are:  M. Barber, Esquire  Name	2
(The Limited Liability Company can business entity with an active Florida St.  The name and the Florida St.  Mark  100 N	Agent, Registered Office, & Registered Agent's Signature: not serve as its own Registered Agent. You must designate an individual or another a registration.) reet address of the registered agent are: M. Barber, Esquire Name Name Tampa Street, Suite 3500	IS AM

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 posttion as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

. . .

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Title: "MGR" = Manager "MGRM" = Managing M	Name and Address:
MGRM	Robert Romera
	9035 Hogans Bend
	Tampa, FL 33647
MGRM	Lorraine Romera
	9035 Hogans Bend
	Tampa, FL 33647
MGRM	Joseph Pino
· · · · · · · · · · · · · · · · · · ·	31402 Shaker Circle
	Wesley Chapel, FL 33543
MGRM	Marina Pino
	31402 Shaker Circle
(Use attachment if necess	Wesley Chapel, FL 33543
	Wesley Chape!, FL 33543  sary)  ther than the date of filing: (OPTIC date must be specific and cannot be more than five business ng.)
LE V: Effective date, if of fective date is listed, the days after the date of fill REQUIRED SIGNATU	Wesley Chape!, FL 33543  sary)  ther than the date of filing: (OPTIC date must be specific and cannot be more than five businessing.)
LE V: Effective date, if of fective date is listed, the days after the date of fill REQUIRED SIGNATU  Signature (In according this details a listed according to the date of this details are detailed as a listed according to the date of this details are detailed as a listed according to the date of this details are detailed as a listed according to the date of this details are detailed as a listed according to the date of t	Wesley Chape!, FL 33543  Bary)  ther than the date of filing:

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\$125.00 Filing Foe for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)