## 108000063348

(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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SECRETARY OF STATE

T. CLINE
JUN 3 0 2008
EXAMINER

## **COVER LETTER**

~	ration Section on of Corporations'	
SUBJECT:	Pershing Enterprise LLC	
	(Name of Limited Liability Company)	
The enclosed Ar	rticles of Organization and fee(s) are submitted for filing.	
Please return all	correspondence concerning this matter to the following:	
Elw	(Name of Person)	
Per	shug Enterprise LLC (Firm/Company)	
	50 Gulf Blvd Condo 314 (Address)	
DNE	City/State and Zip Code)	
For further inform	mation concerning this matter, please call:	
Elwood	T Pershing at (813) 892-9789 (Area Code & Daytime Telephone Number)	
Enclosed is a cl		
\$125.00 Filing	g Fee \$\infty\\$130.00 Filing Fee & \$\infty\\$155.00 Filing Fee & \$\infty\\$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)	=
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

Division of Corporation: P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Pershing Enterpy (Must end with the words "Limited Liability	rise LLC.
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Elwood a Debra Pershing 18650 Gulf Blvd Cond 314 Fudian Shores, Fl 33785	SAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are:
Richard Robbin	s the Arms Configuration
Name  1230 South N  Florida street address	ess (P.O. Box NOT acceptable)
Clear water City, State, an	FL 33765 d Zip
Having been named as registered agent and to ac	ecept 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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member	Elwood J Pershing 18650 Gulf Blud condo 314 Endian Sharas, Il 33785			
Mgrm	Pebra J Porshing 18450 Gulf Bluch Condu 314 Fudian Shere 1 Fl. 33785			
NA				
<u>~/</u> ~				
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the date of filing: \( \subseteq \subseteq \text{\colored} \) (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)				
REQUIRED SIGNATURE:	ANII: 07 E.FLORID			
Signature of a member or a	an authorized representative of a member.			
	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)			

Filing Fees:

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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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

Typed or printed name of signee