

**L12000143350**

Florida Department of State  
Division of Corporations  
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To: **Attn: NEYSA Culligan**  
 Division of Corporations  
 Fax Number : (850) 617-6383  
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From:  
 Account Name : LAW OFFICES OF CARRILLO & CARRILLO,  
 Account Number : I20060000049  
 Phone : (305) 460-6001  
 Fax Number : (305) 460-6002

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: John@inspectionsflorida.com

FLORIDA LIMITED LIABILITY CO.  
PINETREE PARK HOLDINGS, LLC

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



November 8, 2012

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAW OFFICES OF CARILLO & CARILLO

SUBJECT: PINETREE PARK HOLDINGS, LLC  
REF: W12000056629

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

List the name and address of Registered Agent in Article IV.

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) 245-6051.

Neysa Culligan  
Regulatory Specialist II

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
PINETREE PARK HOLDINGS, LLC**

**ARTICLE I- Name:**

The name of the Limited Liability Company is:

PINETREE PARK HOLDINGS, LLC

**ARTICLE II- Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

8203 S.W. 124<sup>th</sup> Street  
Pinecrest, Florida 33156

**ARTICLE III- Management:**

The Limited Liability Company is a manager-managed company.

The Limited Liability Company's manager is the following:

MICALI HOLDINGS, LLC  
8203 S.W. 124<sup>th</sup> Street  
Pinecrest, Florida 33156

**ARTICLE IV- Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent is:

Pu suant to the provisions of Section 608.415 of the Florida Statutes, the undersigned submits the following statement of acceptance of designation of registered agent for the Company.

*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 statues 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, of the Florida Statutes.*

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John S. Micali, Registered Agent  
(Registered Agent's Signature)

8203 SW 124th Street  
Pinecrest, Florida 33156

**ARTICLE V- Duration**

The period of duration for the Limited Liability Company shall begin on the date of filing these Articles of Organization within the Florida Secretary of State, and shall have perpetual existence and duration until terminated in accordance with applicable law.




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JOHN S. MICALI  
Signature of an authorized representative

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