

Division of Corporations

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L0000000 9867

## Florida Department of State

Division of Corporations

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## To:

Division of Corporations  
Fax Number : (850) 922-4003

## From:

Account Name : KANETSKY, MOORE & DEBOER, P.A.  
Account Number : 075350000267  
Phone : (941) 485-1571  
Fax Number : (941) 484-7226

## LIMITED LIABILITY COMPANY

PJ SCOOTERS, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
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ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PJ SCOOTERS, LLC

ARTICLE II - Address

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

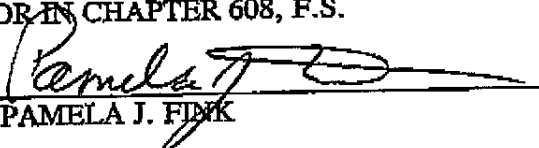
742 Devon Road  
Venice, Florida 34293

ARTICLE III - Registered Agent, Registered Office, & Registered Agents's Signature:

The name and street address of the registered agent are:

PAMELA J. FINK  
742 Devon Road  
Venice, Florida 34293

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, F.S.

  
PAMELA J. FINK


This instrument prepared by:  
Erik R. Lieberman, Esq.  
P. O. Box 1767  
Venice, FL 34284-1767  
941-485-1571  
FL Bar #393053

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ARTICLE IV - Management

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company

  
Signature of a member or authorized  
representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

PAMELA J. FINK

\_\_\_\_\_  
Typed or Printed Name of Signee

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TALLAHASSEE, FLORIDA

This instrument prepared by:  
Erik R. Lieberman, Esq.  
P. O. Box 1767  
Venice, FL 34284-1767  
941-485-1571  
FL Bar #393053

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