10000005421

TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State	
Division of Corporations P. O. Box 6327	
Tallahassee, FL 32314	

SUBJECT: Pirico LLC (Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

400003973284---3 -04/09/01--01135--022 ****125.00 ****125.00

FROM:	ED49Rdo PiN20N Name (Printed or typed)	RETARY OF A
	2573 Mayfair Lane	OF STATE
	Weston FL 33327 City, State & Zip	
•	954-349-3696 Daytime Telephone number	·

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:			
PiRico LLC			
ARTICLE II - Address:			
The mailing address and street address of the principal office of the Limited Liability Co	ompany	is:	
2573 May fair Lane			
Weston, FL, 33327			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu	ıre:		
The name and the Florida street address of the registered agent are:			
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Name 25 73 Mayfan Lane Florida street address (P.O. Box NOT acceptable) Wester FL 33327 City, State, and Zip			
Florida street address P.O. Pay NOT accordity			
Wester address (F.O. Box NOT acceptable)		_	_
City, State, and Zip			
Having been named as registered agent and to accept service of process for the above statistical liability company at the place designated in this certificate, I hereby accept the appointmant registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 608,	ent as visions o with an	of all	
Registered Agent's Signature			
Article IV - Management (Check box if applicable.)	, .		
The Limited Liability Company is to be managed by one manager or more manage therefore, a manager - managed company.	ers and i	s,	
(An additional article must be added if an effective date is requested)	-		
Signature of a member or an authorized representative of a member.	TAT 38	0	
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	CRETAR LAMASS	APR-9	
Typed or printed name of signee	EE, O	2	ווהרט
Typed or printed name of signee	F S]	ćί œ	•
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)	TATE ORIDA	: 02	