To whom it may conc

I would like to file for a Florida Limited Liability Company. Enclosed you will find my check for \$125.00 and the articles of organization. My name, address and daytime phone number are:

Neal Spangler 541 Plover Ave

Miami Springs, FL 33166

(305) 887-8474

Thank you,

-02/25/02---01041---006

****125.00 ****125.00

Neal Spangler



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 28, 2002

NEAL SPANGLER 541 PLOVER AVE. MIAMI SPRINGS, FL 33166

SUBJECT: PINGI INVESTMENTS Ref. Number: W02000005885

We have received your document for PINGI INVESTMENTS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6967.

Letter Number: 302A00012420

Michelle Hodges Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Pingi Investments, L.L.C.
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
541 Plover Ave, Miami Springs, 33166
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Neal Sonaler
Neal Spangler Name
541 Player Ave
Florida street address (P.O. Box NOT acceptable)
Miani Springs, FL 33166
City, State, and Zip
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. Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
(2 in additional article mass be added if any effective date is requested)
- Ild / Della Wall
Signature of a member of an authorized representative of a member.
(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.)
that the facts stated herein are true.)
Typed or printed name of signee Filing Fees:
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)