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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

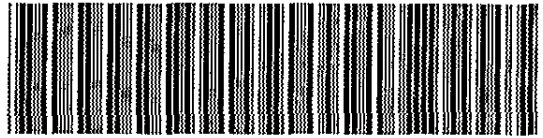
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 OCT 28 PM 2:39

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PBFP Holdings, LLC

3601 PGA Blvd., Suite 301, Palm Beach Gardens, FL 33410

October 25, 2002

Via Airborne: 164 6194 4354

Florida Department of state
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: State Filing Fee for PBFP Holdings, LLC (Florida)

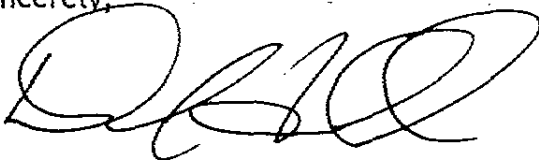
Attn: Registration Section, Division of Corporations

Please find enclosed the original and two copies of the "Articles of Organization form Florida Limited Liability Company" for PBFP Holdings, LLC along with our check#121 in the amount of \$125.00.

Should you have any questions, please contact me at 561-624-3456.

Thank you for your time and attention.

Sincerely,



David W. Harrold

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is: PBFP Holdings, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
3601 P.G.A. Boulevard, Suite 301, Palm Beach Gardens, Florida 33410.

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

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

David W. Harrold

NAME

3601 P.G.A. Boulevard, Suite 301

Florida street address (P.O. Box NOT ACCEPTABLE)

Palm Beach Gardens, Florida 33410

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.

Registered Agent's Signature

ARTICLE IV - Management:

(Check box if applicable)

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

(An additional article must be added if an effective date is requested)

Signature of a member or 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.)

David W. Harrold, Manager

Typed or printed name of signee

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)

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