

L02000029951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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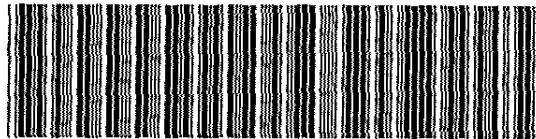
(Business Entity Name)

(Document Number)

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P M ENTERPRISES INCORPORATED L.L.C.

Marcia M. Dorta

6278 N. Federal Hwy. # 355
Ft. Lauderdale, Fl. 33308

954-972-4300

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FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

October 28, 2002

MARCIA M. DORTA
6278 N. FEDERAL HWY. #355
FT. LAUDERDALE, FL 33308

SUBJECT: P M ENTERPRISES INC. L.L.C.
Ref. Number: W02000030930

We have received your document for P M ENTERPRISES INC. L.L.C. and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is an additional \$25 due, as shown on your form. Also, an LLC cannot include the term "Inc." in its name.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 202A00059154

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: PM Enterprises LLC.

ARTICLE II - Address:

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

6278 N. Federal Highway #355 Ft. Lauderdale, Fl. 33308

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

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

Marcia M. Dorta
Name

1107 Marion Place
Florida street address (P.O. Box **NOT** acceptable)

North Lauderdale FL 33068
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.

Marcia M. Dorta
Registered Agent's Signature

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

Marcia M. Dorta
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.)

Marcia M. Dorta
Typed or printed name of signer

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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