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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

1450

Account Name : BILZIN, SUMBERG BAENA PRICE & AXELROD LLP. Account Number : 075350000132

Account Number: 075350000132 Phone: (305)374-7580 Fax Number: (305)350-2446

RECEIVED 04 OCT -5 PM 4: 19 JIVISTON OF BORPORATIC

LIMITED LIABILITY COMPANY

Pembroke Petroleum Developers, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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Public Account Halp

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ARTICLES OF ORGANIZATION OF PEMBROKE PETROLEUM DEVELOPERS, LLC a Florida limited liability company

- 1. The name of the limited liability company is Pembroke Petroleum Developers, LLC.
- 2. The mailing and street address of the principal office of the limited liability company is:

8240 S.W. 150th Drive Miami, Florida 33158

3. The name and street address of the initial registered agent of the limited liability company are:

C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324

Dated: as of October 5, 2004

Warren Sands, Member

FILED

SECKNIASSEE, FLORIDA

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE.

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	1. The name of the Limited Liability Company is:		
	Pembroka Petroleum Developers, LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	C T Corporation System		
(Name)			
c/o C T Corporation System, 1200 South Pine Island Road			
Florida street address (P.O. Box NOT ACCEPTABLE)			
	•		
	Plantation FL 33324		
City/State/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 ast 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..

C T Corporation System

PETER F. SOUZA

AMERICAN ECCEPTATO

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

TL054 - 9/28/99 CT System Calino