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2004-05-05 P 2:00

SEC. OF REVENUE
TOLSON, MISSOURI, MO, USA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

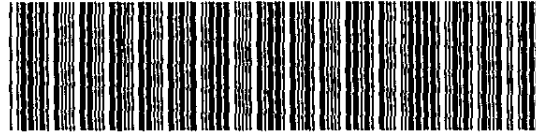
(Document Number)

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11/05/04--01013--017 **160.00

To whom it may concern:

This is the requested information to accompany the Articles of Organization
For Florida.

PAULINE CARTER

12000 SW 135 TERRACE
MIAMI, FLORIDA 33186

305-233-5384
305 903 3015 CEL(EMAIL CART12344@AOL.COM)

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2007-5 P 2:00

2007-5 P 2:00



10/28/04

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NOV-5 P 2:00

ARTICLE I - Name:

The name of the Limited Liability Company is:

PC REAL ESTATE GROUP LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

12000 SW 135 TER
MIAMI
FLORIDA 33186

12000 SW 135 TER
MIAMI
FLORIDA 33186

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

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

PAULINE D CARTER

Name

12000 SW 135 TER

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

MIAMI FL 33186

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

(CONTINUED)

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MANAGER/MGR
DIRECTOR

Name and Address:

PAULINE D CARTER
12000 SW 135 TER
MIAMI FL 33186

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CLERK OF COURT
DADE COUNTY, FLORIDA

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Pauline D Carter

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.)

PAULINE D CARTER

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)