

LD5000005034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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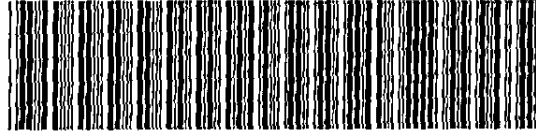
(Business Entity Name)

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TALLAHASSEE, FLORIDA

J. BRYAN JAN 18 2005



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 146920 7160058

AUTHORIZATION :

*Patricia Pizeto*

COST LIMIT : \$ 125.00

ORDER DATE : January 14, 2005

ORDER TIME : 9:24 AM

ORDER NO. : 146920-005

CUSTOMER NO: 7160058

CUSTOMER: Ms. Joanne Capuano  
David J. Wiener, P.a.

Suite 305  
One North Clematis Street  
West Palm Beach, FL 33401

FILED  
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ALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: MUELLER FAMILY PB HOLDINGS,  
LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS: \_\_\_\_\_

JAN-14-2005 11:59

P.03/04

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

The name of the Limited Liability Company is:

Mueller Family PA Holdings, LLC**ARTICLE II - Address:**

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

**Principal Office Address:**c/o Robert Lee Shapiro, P.A.  
2401 PGA Boulevard, Suite 272  
Palm Beach Gardens, FL 33410**Mailing Address:**c/o Robert Lee Shapiro, P.A.  
2401 PGA Boulevard, Suite 272  
Palm Beach Gardens, FL 33410**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Robert Lee Shapiro, Esq.

Name

2401 PGA Boulevard, Suite 272Florida street address (P.O. Box **NOT** acceptable)Palm Beach Gardens, FL 33410 FL

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)

Page 1 of 2

**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

**Name and Address:**

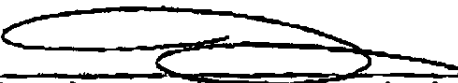
MGR

Craig Mueller  
763 Grandin Road  
Charlotte, NC 28208

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

  
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.)

Robert Lee Shapiro

Typed or printed name of signer

**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)

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