

L050000 91818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

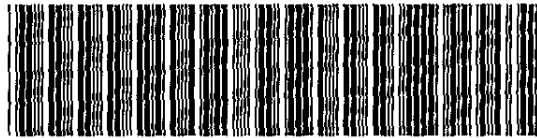
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**GRAY | ROBINSON**  
ATTORNEYS AT LAW

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301 SOUTH BRONOUGH ST. (32301)  
POST OFFICE BOX 11189  
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September 16, 2005

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Tallahassee, FL 32301

Via Hand Delivery

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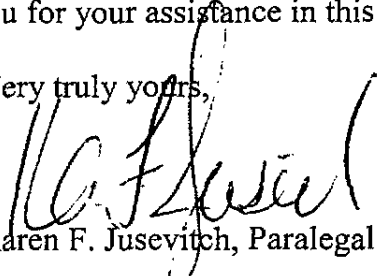
To Whom It May Concern:

Enclosed for filing, please find the **ARTICLES OF ORGANIZATION**, along with a check in the amount of **\$155.00** for the applicable filing fees and to obtain a **CERTIFIED COPY** for the following entity:

**PH PACIFIC II, LLC**

Upon receipt, please "date-stamp" the copy of the letter provided and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Very truly yours,

  
Karen F. Jusevitch, Paralegal

/kfj  
Enclosures

**ARTICLES OF ORGANIZATION**  
**FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

PH PACIFIC II, LLC

**ARTICLE II - Address:**

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


7598 WEST SAND LAKE ROAD  
ORLANDO, FL 32819

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

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

MICHAEL E. NEUKAMM  
301 E. PINE ST., SUITE 1400  
ORLANDO, FL 32828

*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:**

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



AUTHORIZED REPRESENTATIVE'S SIGNATURE

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.

MICHAEL E. NEUKAMM  
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)