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SECRE ASSEE, FLORIDA

COVER LETTER

TO:	Registration Se Division of Co.			
SUBJ	_{ECT:} P.H. F	artners, L.L.C.		
	<u></u>		Liability Company)	
The er	closed Articles o	f Organization and fee(s) are su	ibmitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
	Lawrence	R. Heller, Esquir		
-		(t	Name of Person)	
	Gilbride, I	Heller & Brown, P	.A.	
		O	Firm/Company)	
	2 South	Biscayne Boulev	ard, Suite 1570	
			(Address)	
	Miami, F	lorida 33131		
		(City/	State and Zip Code)	
For fu	rther information	concerning this matter, please	call:	
Law	rence R. F	leller	at (305) 358-35	580
	(Name	of Person)	(Area Code & Daytime	l'elephone Number)
Enclo	sed is a check fo	or the following amount:		
=== \$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street/Courier Addre Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:	
P.H. Partners, L.L.C.	TION WILLIAM WILLIAM	(T. C. II)
(Must end with the words "Limited Liability Company, "Limited Liability Company, "Limited Liability Company,"	ted Company" or their abbreviation "LLC," or	: "L.C.,")
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
929 Clint Moore Road	929 Clint Moore Road	
Boca Raton, Florida 33487	Boca Raton, Florida 33487	
business entity with an active Florida registration.) The name and the Florida street address of the Lawrence R. Heller, Esc.		
Name		
	South Biscayne Boulevard, Suite 1570	
Florida street ac	ldress (P.O. Box <u>NOT</u> acceptable)	
Miami City, State,	FL 33131	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paccept the obligations of my position as registered Agent's Signature. (CONTINE Page 1 of	this certificate, I hereby accept the city. I further agree to comply with the erformance of my duties, and I am fistered agent as provided for in Character (REQUIRED)	appointment as ne provisions of all amiliar with and

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

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

MGRM"	Peter Baronoff
	929 Clint Moore Road Boca Raton, Florida 33487
MGRM"	Howard Koslow
	929 Clint Moore Road
	Boca Raton, Florida 33487
Use attachment if necessary)	
.F.V: Effective date if other than	the date of filing: (OPTION

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.)

Lawrence R. Heller, Esq., Attorney in fact/authorized agent for the members
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)

SECRETARY OF STATE ALLAHASSEE, FLORIDA