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From:

Account Name : SHAPIRO & ADAMS, P.A.

Account Number: 119990000101 Phone: (561)691-0059 Fax Number: (561)691-0066

LIMITED LIABILITY COMPANY

Professional Apartment Maintenance & Marketing LLC

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ARIK	LES OF ORGANIZATION FOR FLO	ORIDA LIMITED LIAP	BLITY COMPANY
	CLE I - Name: me of the Limited Liability Company is:		
Pro	with the words "Limited Liability Company, "Limited	tenance & Mark	eting LLC
	CLE II - Address: illing address and street address of the prin	cipal office of the Limited	Lizbility Company is:
Princi	al Office Address:	Mailing Address:	
_5 <u>%</u>	B. Quintona Pl. N.B. H. Deborburg FI 33703	Same	ALEGO T
رشا بدا)	LE III - Registered Agent, Registered C ted Liability Company cannot serve as its own Registers outly with an active Florida registration.)	Office, & Registered Agen id Agent. You must designate an in-	dividual or mother
The na	me and the Florida street address of the reg	ristered agent are:	9: 16 FLORIDA
	583 Out in tang Florida street addres St. Peterschurg Fl City, State, and	Pl. N.E. 15 (P.O. Box NOT acceptable) 15 (P.O. Box NOT acceptable) 2	
lia registi stan	g been named as registered agent and to accivility company at the place designated in this red agent and agree to act in this capacity. tes relating to the proper and complete perforept the obligations of my position as register. Registered Agent Scienture	certificate, I hereby accept I finther agree to comply wi armance of my duties, and I a red agent as provided for in	the appointment as ith the provisions of all am familiar with and
	(CONTINUE Page Lot2	(D)	LO 3/05

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	RITCLE IV- Manager(s) or Managing Member(s): no name and address of each Manager or Managing Member is as follows:	
'T\	Name and Address: Name and Address: Okalis	
<u>, v</u>	MIRW Eric Shapiro 583 Quintina Pl. VB. 51. Teleshora F1 3370	3
· w	Mike Novontevski 2727 W. Fletcher Ave Tomps Fl 33618	Apr. 23.
MG	Alisan Vasekos 2727 W. Fletchar Auc Tampo F/ 33618	Apt 23:
W	GRM Pamela Armorida	 T(53
(Us	se attachment if necessary)	
(If an effect to or 90 days	V Effective date, if other than the date of filing: Oct 3 2005 (OPT tive date is listed, the date must be specific and cannot be more than five business after the date of filing.) OUTRED SIGNATURE:	TONAL) sa daya prior
K.		05 00 SECT
***************************************	(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 borein are true.)	007-6 A
3. 3. 8. 6. 7.	Filtrag Rees:	OF STATE
5	\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Cartified Copy (Optional) \$ 5.00 Cartificate of Status (Optional)	
3 \$	Page 2 of 2	

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