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SECRETARY OF STATE TALLAHASSEE. FLORIDA

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W5/13980

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: PV 285 HOLDINGS, LLC			
(Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
BEATRIZ FERNANDEZ			
(Name of Person)			
(Firm/Company)			
2520 SW 22 STREET, 2363 (Address)			
(Address)			
MIAMI FL 33145			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
For further information concerning this matter, please call: Beatric Femerals at 305 898-0845 FF P (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee,			
Certificate of Status Certified Copy Certificate of Status &			
(additional copy is enclosed) Certified Copy (additional copy is enclosed)			
Muiling Address Registration Section Street/Courier Address Registration Section			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

the name of the Limited Liability Company is	S:	
PV 285 HOWARS, LL	C	
Must end with the words "Limited Liability Company, "Lim	nited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company i	s:
Principal Office Address:	Mailing Address:	
PO BOX 654312	PO BOX 654312	
MIAMI R 33/65	MIAMI FL 33/65	
The Limited Liability Company cannot serve as its own Registration.) The name and the Florida street address of the FAMIGAL Nam 2500 - Florida street a MAAMI	ed Office, & Registered Agent's Signature: S	

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 (REQUIRED)

(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 ARTICLE V. Effective date, if other than the date of filling: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filling.

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.)

SEATER FERNANDEZ

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)