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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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01/11/06--01015--023 \*\*155.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 JAN 11 PM 1:24

FILED

Robert J. Pass  
3324 Callerton Road  
Clermont, FL 34714  
352.243.9824

January 5, 2006

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: PaBo Properties, LLC

Dear Sir or Madam:

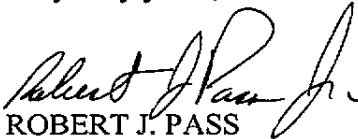
Attached are Articles of Organization for PaBo Properties, LLC.

Also enclosed is my firm trust account check in the amount of \$155.00 representing the Filing Fee - \$100, Designation of Registered Agent - \$25, and a certified copy of the Articles - \$30 (copy for certification enclosed).

Please return the certified copy along with your receipt for filing to me in the enclosed envelope.

Thank you for your assistance.

Very truly yours,

  
ROBERT J. PASS

Enclosures  
cc: PaBo Properties, LLC

MyDocuments/PaBo

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TALLAHASSEE FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
PaBo Properties, LIMITED LIABILITY COMPANY**

The undersigned person(s) pursuant to the provisions of the Florida Limited Liability Company Act, hereby adopt the following Articles of Organization:

**FIRST:** The name of the Limited Liability Company shall be: PaBo Properties, Limited Liability Company.

**SECOND:** The period of its duration shall be perpetual.

**THIRD:** The mailing address and street address of the principal office is: 3324 Callerton Road, Clermont, Florida 34714.

**FOURTH:** The name and street address of the registered agent within the State of Florida is: ROBERT J PASS, 3324 Callerton Road, Clermont, Florida 34714.

**FIFTH:** The Limited Liability Company is to be **member** managed.

**SIXTH:** The person or persons executing these Articles of Organization is (are) member or the authorized representative of a member of the Limited Liability Company.

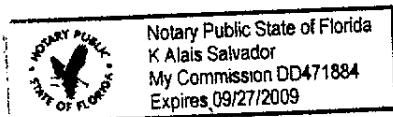
**IN WITNESS WHEREOF**, the undersigned have executed these Articles of Organization of and acknowledged them to be our act and deed this 5th day of January, 2006.

Signed: \_\_\_\_\_

Robert J. Pass

STATE OF FLORIDA )  
COUNTY OF LEE )

SWORN TO and subscribed before me this 6<sup>th</sup> day of Jan, 2006 by ROBERT J. PASS who ☒ is personally known to me or ☐ produced \_\_\_\_\_ as identification and who did take an oath.



Notary Public

K Alais Salvador

Having been named as registered agent and to accept service of process for the above stated

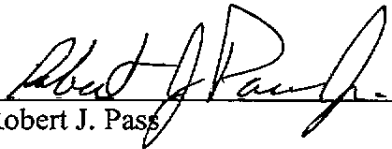
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TALLAHASSEE, FLORIDA

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..

DATE: 1/6/06

  
Robert J. Pass

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