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RUSH, MARSHALL, JONES AND KELLY, P.A.

FLETCHER G. RUSH (1917-2003)
CHARLES V. MARSHALL (1929-1994)
CHARLES R. GEORGE, III (1950-2005)
DAVID B. JONES
ROGER A. KELLY
JAMES C. HINCKLEY
ROBERT S. HOOFMAN
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ROBERT J. WATSON, JR.
RACHAEL M. CREWS

MAGNOLIA PLACE 109 EAST CHURCH STREET, 5TH FLOOR POST OFFICE BOX 3146 ORLANDO, FLORIDA 32802-3146

407-425-5500 FACSIMILE 407-423-0554 E-MAIL JHINCKLEY@RUSHMARSHALL.COM

November 8, 2006

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Pine Station Bar, LLC

Dear Sirs:

I enclose Articles of Organization for this LLC and a check for \$155.00.

Please file and send me a certified copy.

Very truly yours,

James C. Hinckley

JCH/wpf Encl.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pine Station Bar, LLC			
(Must end with the words "Limited Liability Company, "	Limited Company" or their abbreviation "LLC,"	or "L.C.,")	
ADTICLE II A JAnna			
ARTICLE II - Address:		1.11. 0	
The mailing address and street address of the	he principal office of the Limited Lia	bility Compa	my is:
Principal Office Address:	Mailing Address:		
343 Broadway Avenue			
Orlando, FL 32803			
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		lual or another	200
The name and the Florida street address of	the registered agent are:	L AH	מחמג אחע
Michael Mauro		BA 1	<u>-</u> ک
Name		<u> </u>	the state of the s
343 Broadway Street		OF S	PR U
Florida stre	et address (P.O. Box NOT acceptable)	ORI [? ?
Orlando	FL 32803	DE (ప
City, S	tate, and Zip		

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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Michael Mauro 343 Broadway Avenue Orlando, FL 32803 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (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 filing.) **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.) Michael Mauro 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)