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(Ad	ldress)	
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COVER LETTER

TO:	Registration Se Division of Co			
SUBJI	ECT:	Pioneer Community	Ventures, LLC.	
		(Mano of Diffine	a Diagnity Company)	
The en	closed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	er to the following:	
	Н	oracio F. Moncada		
		C	Name of Person)	
	Pi	oneer Community V	entures, LLC.	
		(Firm/Company)	_
	16	880 NW 92 Terrace).	2006 SECF ALLA
			(Address)	RETAR NHASS
	P	lantation, Florida 3	33322	
	,	(City	/State and Zip Code)	Fo U
For fur	ther information	concerning this matter, please	call:	F STATE FLORIDA
Hor	acio F. Mon	cada	at (954) 638-79	971
	(Name	of Person)	(Area Code & Daytime	e Telephone Number)
Enclos	sed is a check fo	or the following amount:		
□ \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Adding Registration Section Division of Corporate Clifton Building 2661 Executive Centrallahassee, FL 323	tions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Co	ompany is:
Pioneer Community ventur	res, LLC.
(Must end with the words "Limited Liability Con	npany, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	ss of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1680 NW 92 Terrace	1680 NW 92 Terrace.
Plantation, Florida 33322	Plantation, Florida
ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street addresses	T S
	oracio F. Moncada
-	Name
16	680 NW 92 terrace.
Flori	ida street address (P.O. Box NOT acceptable)
	Plantation, FL 33322
	City, State, and Zip
Having haan named as registered as	ant and to accent service of process for the above stated limited

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 Reguliero (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:

MGRM -	Horacio Moncada	
	1680 NW 92 Terrace.	
	Plantation, FL 33322	
MGRM -	Mirtha Brawn	
	1680 NW 92 Тептасе	
	Plantation, FL 33322	
Lice attachment if pagessons		1006 NOV 27 PECRETARY OF
Use attachment if necessary)		SIA OPTEON five business d
EV: Effective date, if other than the d	late of filing: December 15, 2006	
ective date is listed, the date must be days after the date of filing.)	specific and cannot be more than	five business d

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.)

HORACIO F. MONCADA

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)