

L07000024807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

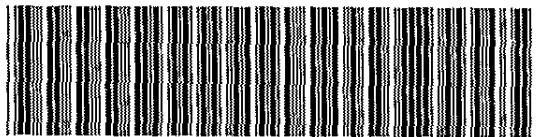
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000088195420

03/07/07--01001--010 **160.00

RECEIVED

07 MAR -6 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

07 MAR -6 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT Corporation System

1203 Governors Square Blvd, Suite 101, Tallahassee 850-222-1092

PREC Pensacola, LLC

New Filing

FILED
07 MAR - 9 AM 10:07
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

☐ Profit☐ Amendment☐ Merger☐ Nonprofit☐ Foreign☐ Dissolution/Withdrawal☐ Mark☐ Reinstatement☐ Limited Partnership☐ Annual Report☐ Other☒ LLC☐ Name Registration☐ Change of RA☐ Fictitious Name☐ UCC☒ Certified Copy
At the time of filing☐ Photocopies☒ CUS
At the time of filing☐ Call When Ready☐ Call If Problem☐ After 4:30☒ Walk In☐ Will Wait☒ Pick Up☐ Mail Out

Name

3/6/2007

Order#: 6869387 SO

Availability _____

Document

AAM

Examiner _____

Ref#: _____

Updater _____

Verifier _____

W.P. Verifier _____

Amount: \$ _____

CT Corporation System

1203 Governors Square Blvd, Suite 101, Tallahassee 850-222-1092

PREC Pensacola, LLC

New Filing

FILED
07 MAR - 6 / AM 10:07
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

☐ Profit☐ Amendment☐ Merger☐ Nonprofit☐ Foreign☐ Dissolution/Withdrawal☐ Mark☐ Reinstatement☒ Limited Partnership☐ Annual Report☐ Other☒ LLC☐ Name Registration☐ Change of RA☐ Fictitious Name☐ UCC☒ Certified Copy☐ Photocopies☒ CUS

At the time of filing

At the time of filing

☐ Call When Ready☐ Call If Problem☐ After 4:30☒ Walk In☐ Will Wait☒ Pick Up☐ Mail Out

Name

3/6/2007

Order#: 6869387 SO

Availability _____

Document

AAM

Examiner _____

Ref#: _____

Updater _____

Verifier _____

W.P. Verifier _____

Amount: \$ _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PREC Pensacola, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "LLP")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1265 Silver Fox Court
Roswell, Georgia 30075

Mailing Address:

1265 Silver Fox Court
Roswell, Georgia 30075

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

CT Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box **NOT** acceptable)

Plantation, FL 33324

City, State, 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..

Jeffrey D. Butterfield
Assistant Secretary

J.D.B.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
07 MAR -6 AM 10:07
TALLAHASSEE FLORIDA
SECRETARY OF STATE

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

Name and Address:

MGR

Ramon Gonzalez III

1265 Silver Fox Court

Roswell, Georgia 30075

MGR

Douglas Hart Maschoff

250 Pharr Road, Suite 2108

Atlanta, Georgia 30305

(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.


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.)

Ramon Gonzalez III, Manager / Douglas Hart Maschoff

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)