

LO 7000032096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

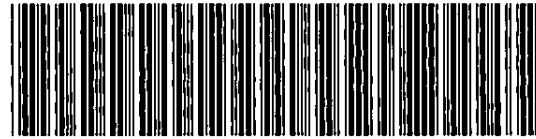
(Business Entity Name)

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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a Wolters Kluwer business

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1203 Governors Square Blvd.
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850 222 1092 tel
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March 26, 2007

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 6884453 SO
Customer Reference 1: 23114-6
Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

PVHA/SIMS-SAVANNAH, LLC

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jennifer Murphy
Fulfillment Specialist
jennifer.murphy@wolterskluwer.com

**ARTICLES OF ORGANIZATION
OF
PVHA/SIMS-SAVANNAH, LLC
A Florida Limited Liability Company**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE 1

NAME

The name of this Limited Liability Company is: PVHA/SIMS-SAVANNAH, LLC.

ARTICLE 2

DURATION

The duration of this limited liability company is perpetual from the date of commencement of the limited liability company's existence. The date and time of commencement of the limited liability company's existence is the time of filing of the original articles of organization by the Department of State of State of Florida.

ARTICLE 3

PRINCIPAL OFFICE

The mailing address and street address of the principal office of the limited liability company is 50 A1A North, Suite 110, Ponte Vedra Beach, Florida 32082.

ARTICLE 4

REGISTERED AGENT

The name and address of the registered agent of the limited liability company is William T. Filippone, 50 A1A North, Suite 110, Ponte Vedra Beach, Florida 32082.

IN WITNESS WHEREOF, the undersigned representative does hereby execute and
acknowledge these Articles of Organization this 26 day of March, 2007.

PVHA/SIMS-Savannah, LLC,

By: Matthew
Matthew V. Wilson, Authorized Representative

**CERTIFICATE DESIGNATING REGISTERED
AGENT AND STREET ADDRESS FOR
SERVICE OF PROCESS**

Pursuant to Section 608.415 Florida Statutes, PVHA/SIMS-Savannah, LLC hereby designates William T. Filippone, 50 A1A North, Suite 110, Ponte Vedra Beach, Florida 32082, as its registered agent and the street address of its registered office, respectively, for service of process within the State of Florida.

PVHA/SIMS-Savannah, LLC

By: 
Matthew V. Wilson, Authorized Representative

ACCEPTANCE OF DESIGNATION

The undersigned understands the obligations of and hereby accepts the foregoing designation as registered agent of PVHA/SIMS-Savannah, LLC, for service of process within the State of Florida.

By: 
William T. Filippone, Registered Agent