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COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: 54A of PBG (LCC (Name of Limited Liability Company)	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
PARTHUM WOSTEIN (Name of Person)	
(Name of Person)	
PAS ACCOOLTING SOLUCES (Firm/Company)	
106 ANSONIA NORD (Address)	
(Address)	
(City/State and Zip Code)	3038
(City/State and Zip Code)	W.
	NY OF STATIONS
For further information concerning this matter, please call:	200
PATHUR Weinstein at (203) 397-1080 [Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	জ
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, 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 Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SAA OF PBG LLC

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

ARTICLE II - Address:

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

Principal Office	Address:	—Mailing-Address:	and the second second	, , ,== -3 ^{,,=}
PALM BE	THE BANGENS TL 3041	8 WOODBAJAGE	(A ROAD)	5-
(The Limited Liability business entity with a	Registered Agent, Registere Company cannot serve as its own Region active Florida registration.) e Florida street address of the	stered Agent. You must designate a		100 E
	ARTHUR WEINSTE	111	21 MI	ARY OF S
		LADON CINCLE dress (P.O. Box NOT acceptable	(e)	RATIONS
	PALM BEACH GARAGE	SFL 33418	,	-

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" = Manag "MGRM" = Man					
MGRM		ARTHUR	WEINS	TEIN	
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(Use attachment	if necessary)				4
n effective date is lis	date, if other than the dated, the date must be s				OPTIONAL) siness days prior
r 90 days after the da	ate of filing.)				07 07
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REQUIRED SI	GNATURE	Lein Fe or an authorized r	epresentative o	of a member.	AM 8:
REQUIRED SI		on 608.408(3), Flor tes an affirmation u	ida Statutes, the	execution	<u>e</u>
REQUIRED SI	Signature of a member of this document constitu	on 608.408(3), Flor tes an affirmation u ein are true.)	ida Statutes, the	execution	AM 8:

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)