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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0393

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

FLORIDA/FOREIGN LIMITED LIABILITY CO.

P & D CAPITAL INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Second Request

FROM : LAZARUS

07/23/2007 01:11

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

P&D CAPITAL INVESTMENTS, 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:

7819 SW 102 LN
MIAMI, FL 33156

Mailing Address:

7819 SW 102 LN
MIAMI, FL 33156

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:

KEVIN DOVER
Name

7819 SW 102 LN

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

MIAMI FL 33156

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 605, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

KEVIN DOWE = VICE President

7819 SW 102 LN
MIAMI, FL 33152

RICKY PATEL = Director

7819 SW 102 LN
MIAMI, FL 33152

(Use attachment if necessary)

ARTICLE V- FILING OF THIS DOCUMENT:

This document shall be filed with the Secretary of State of the State of Florida, and shall remain in effect for a period of (1) one (1) year from the date of filing, or (2) days from the date of filing.

REQUIRED SIGNATURE:



On accordance with Section 608.406(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.
RICKY PATEL
Typed or printed name of signer

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)

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