L07000078001

(Requestor's Name)				
(Address)				
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Registration Section

Division of Corpora	ations		
_{SUBJECT:} Pro-Ace	Holdings, LL	.C	
5520251.		ed Liability Company)	
The enclosed Articles of Orga	anization and fee(s) are	submitted for filing.	
Please return all corresponder	nce concerning this matt	ter to the following:	
	W. Ro	dgers Moore, P.A.	
		(Name of Person)	
	Moore	& Menkhaus, P.A	•
		(Firm/Company)	
	1900 (Glades Road, Suite	e 401
		(Address)	
	Boca F	Raton, FL 33431	2. TAL
	(Cit	y/State and Zip Code)	ORE
For further information conce	erning this matter please	e call:	JUL 27 A
	, , , , , , , , , , , , , , , , , , ,		14 FLS
W. Rodgers Mo		at (561) 394-794 (Area Code & Daytime Tele	44 55 6
(Name of Pe	rson)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for the	following amount:		
\$125.00 Filing Fee \$\sum_{\text{C}}\$	130.00 Filing Fee & ertificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Re Di P.	ailing Address egistration Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2007

W. RODGER MOORE, P.A. 1900 GLADES ROAD SUITE 401 BOCA RATON, FL 33431

SUBJECT: PRO-ACE HOLDINGS, LLC

Ref. Number: W07000034166

We have received your document for PRO-ACE HOLDINGS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 307A00045207

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICI	ÆI-	- Nan	ne:
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The name of the Limited Liability Company is:

Pro-Ace Holdings, LLC

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

ARTICLE II - Address:

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

Principal Office Address: 2255 Glades Road Suite 324-A, #1162 Boca Raton, FL 33431 Mailing Address: P.O. Box 273528 Boca Raton, FL 33427

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:

W. Rodgers Moore, P.A.

1900 Glades Road, Suite 401

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

Boca Raton _{FL} 33431

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..

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Bristlecone Capital Management, LLC
	PO Box 273528
	Boca Raton, FL 33427
	As 7
	[C 0]
	SP
(Use attachment if necessary)	STAI
(Ose attachment if necessary)	1 8
CLE V: Effective date, if other than the d	late of filing: (OPTIONAL)
n effective date is listed, the date must be	specific and cannot be more than five business days price
90 days after the date of filing.)	
1	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE.	
γ,	
· \N	
Signature of a mexicer	or an authorized representative of a member.
(In accordance with act	ion 608 408(3). Florida Statutes, the execution
of this document constituent that the facts stated he	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
John P. Fos	s. Manager

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)

Typed or printed name of signee