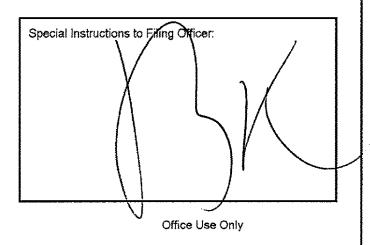
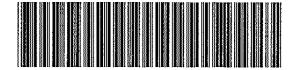
L07000092700

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)



Certificates of Status

Certified Copies _____



200109114912



SEP II PH 3: 54 CRE IARY OF STATE



ACCOUNT NO. : 072100000032	
- REFERENCE : 222244 7448543	-
AUTHORIZATION: Include man	
COST LIMIT : \$ 180.00	TAR TO
ORDER DATE : _September 11, 2007	E LANGE
ORDER TIME : 12:33 PM	PER S
ORDER NO. : 222244-055	SIA SIA
CUSTOMER NO: 7448543	10 A
DOMESTIC FILING	
NAME: PECPAR-E, LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Susie Knight - EXT. 2956	
EXAMINER'S INITIALS:	

ARTICLE I -	Name:	Con the	Name of the last
	e Limited Liability Compa	any is:	_ \ _
		55.7	PA 3: 51
Pecpar-E, LLC		70	بَيَ
(Must end with the	words "Limited Liability Company	, "Limited Company" or their abbreviation "LLC," or "L.C.,")	5
ADTICLEU	A daluages		E. C.
ARTICLE II - The mailing ad		f the principal office of the Limited Liability Compa	ny is:
			•
Principal Offi	ce Address:	Mailing Address:	
8441 Cooper Cre	eck Blvd	8441 Cooper Creek Blvd	
University Park,	Florida 34201	University Park, Florida 34201	
		istered Office, & Registered Agent's Signature:	
(The Limited Liabil business entity wit	lity Company cannot serve as its ov th an active Florida registration.)	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:	
(The Limited Liabil business entity wit	lity Company cannot serve as its ov th an active Florida registration.)	of the registered agent are:	
(The Limited Liabil business entity wit	lity Company cannot serve as its or th an active Florida registration.) the Florida street address	wn Registered Agent. You must designate an individual or another	
(The Limited Liabil business entity wit	lity Company cannot serve as its or th an active Florida registration.) the Florida street address of David H. Baldauf 8441 Cooper Creek Blvd	wn Registered Agent. You must designate an individual or another of the registered agent are:	
(The Limited Liabil business entity wit	lity Company cannot serve as its or th an active Florida registration.) the Florida street address of David H. Baldauf 8441 Cooper Creek Blvd	wn Registered Agent. You must designate an individual or another of the registered agent are:	
(The Limited Liabil business entity wit	lity Company cannot serve as its or th an active Florida registration.) the Florida street address of David H. Baldauf 8441 Cooper Creek Blvd Florida s University Park	of the registered agent are: Name Name Treet address (P.O. Box <u>NOT</u> acceptable)	
(The Limited Liabil business entity wit	lity Company cannot serve as its or th an active Florida registration.) the Florida street address of David H. Baldauf 8441 Cooper Creek Blvd Florida s University Park	of the registered agent are: Name Name Name Negistered agent are:	

(CONTINUED) Page 1 of 2

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:

MGR		David H. Baldauf
		8441 Cooper Creek Blvd
		University Park, FL 34243
	··	
_		
(Use attachment if ne	cessary)	
LE V: Effective date	, if other than the dat	te of filing: (OPTIONA
fective date is listed.	the date must be sp	pecific and cannot be more than five business day
days after the date of		

(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.)

By: David H. Baldauf, Manager

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)