L07000099628

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400110022154

10/02/07--01001--001 **130.00



· COVER LETTER

TO:	Registration Section Division of Corporations
SUBJI	T: PYMS Investments, LLC (Name of Limited Liability Company)
The en	osed Articles of Organization and fee(s) are submitted for filing.
Please	turn all correspondence concerning this matter to the following:
	hence Antonette Marie Sterling (Name of Person)
	(Firm/Company)
	702 Sw 164th Street (Address)
	(City/State and Zip Code)
For fu	er information concerning this matter, please call:
Rene	Sterling at (305) 979-5301 (Name of Person) (Area Code & Daytime Telephone Number)
	d is a check for the following amount: 0 Filing Fee \$\sim\$\$\$\$\\$130.00 \text{ Filing Fee & } \sim\$
	Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:				
P.). M.S Investments, 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	e principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
9021 Sw 1645 St. Hiami, FL 33157	9021 SW 1645 St. Miamii FL 33157			
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the florida street address of the florida street address of the florida street was a florida street. 4021 36 164th Florida street Hiami	28 PM 2			
liability company at the place designated	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all			

Registered Agent's Signature (REQUIRED)

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..

Title.	Name and Address.
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Renee Sterling (MGRM)	4021 Su 164th Street Hiami, Florida 33157
· · · · · · · · · · · · · · · · · · ·	
	<u> </u>
<u>.</u>	
(Use attachment if necessary)	
REQUIRED SIGNATURE: Signature of a m (In accordance wof this document	ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)
henee Ar	Typed or printed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of of Registered Agent \$ 30.00 Certified Copy (Optional	•

\$ 5.00 Certificate of Status (Optional)