<u>L0800030585</u>

(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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SECRETARY OF STATE DIVISION OF CORPURATION

G. MCLEOD

MAR 2 6 2008

EXAMINER

COVER LETTER

TO:	Registration S Division of C		•			
SUBJ	_{ECT} . PN Fa	amily Real Estate I	Holdings, LLC			
(Name of Limited Liability Company)						
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing.			
Please	return all corresp	oondence concerning this mat	tter to the following:			
	Paul Nem	iroff				
(Name of Person)						
(Firm/Company)						
	777 Bricke	ell Avenue, Suite 4				
			(Address)			
	Miami, FL					
(City/State and Zip Code)						
For fur	ther information	concerning this matter, please	e call:			
Alex	Nemiroff		at (305) 401-4148			
	(Name	of Person)	(Area Code & Daytime Telephone Number)			
Enclos	sed is a check fo	or the following amount:				
\$125.	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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 Co.	mpany is:
PN Family Real Estate Hold	lings LLC
	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	`
	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
777 Brickell Avenue, Suite 400	777 Brickell Avenue, Suite 400
Miami, FL 33131	Miami, FL 33131
the Limited Liability Company cannot serve as in business entity with an active Florida registration. The name and the Florida street addre	ss of the registered agent are:
DAVID AUSL	Name S OS
777 Brighall A	
	de transfer del de la Companya (D. C. Douglier MOT apparentable)
MIAMI	20404 3 3 3 5 5
	FL 33131 City, State, and Zip
liability company at the place design registered agent and agree to act in the statutes relating to the proper and confidence accept the obligations of my positions.	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as a sis capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR	TRACY NEMIROFF	
	1330 WEST AVENUE, APT 703	
	MIAMI BEACH, FL 33139	
		\
MGRM	PAUL NEMIROFF	
	777 Brickell Avenue, Suite 400	
	MIAMI, FL 33131	
MGRM	ALEX NEMIROFF	
WORW	1330 WEST AVENUE, APT 703	 ;
	MIAMI BEACH, FL 33139	
		/
		,
		
		\
		, i
(Use attachment if necessary)		\
(Ose attachment in necessary)		· \
CLE V: Effective date, if other than the	date of filing: 3/19/08	. (OPTIONAL) \
effective date is listed, the date must be	specific and cannot be more than five	_ ` /
90 days after the date of filing.)	e specific and cannot be more than his	e business days pri
o days after the date of filling.		•
REQUIRED SIGNATURE:	_	
REQUIRED SIGNATURE.		
(C.W.)		
Signature of democratic	n or on duth orbinal managementative of a man	

Signature of a member or an authorized representative of a member.
(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.)

Alex Nemiroff

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)