L08000052034

| (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



100129921101

05/23/08--01011--005 **155.00

SITIOS



COVER LETTER

| TO: | Registration S Division of Co | | | | |
|-------------|----------------------------------|---|--|--|--|
| SUBJI | ECT: PGTes | soro Preserve, LL | С | | |
| 5020 | | | ted Liability Com | pany) | |
| The en | closed Articles o | f Organization and fee(s) are | submitted for filin | ng. | |
| Please | return all corresp | condence concerning this mat | tter to the followin | ıg: | |
| | Pablo A G | uzman | | | |
| | | | (Name of Person) | | |
| | | | (Firm/Company) | | |
| | 3200 N. O | cean Blvd., Apt 1 | 503 | | |
| | | | (Address) | | |
| | Ft. Lauder | rdale, Florida 33 | 308 | | |
| | | (Ci | ty/State and Zip Coo | de) | |
| For fu | rther information | concerning this matter, pleas | e call: | | |
| Pab | lo A Guzm | an | at (954 | 895-592 | 26 |
| | (Name | of Person) | (Area Co | de & Daytime Tel | lephone Number) |
| Enclos | sed is a check fo | or the following amount: | | | |
| \$125 | .00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | S155.00 Fili Certified Co (additional co | _ | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registra Division Clifton 2661 Ex | Courier Address ation Section in of Corporation Building secutive Center (ssee, FL 32301 | s |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | | |
|---|---|--|--|
| The name of the Limited Liability Company | is: | | |
| | | | |
| PGTesoro Preserve, LLC | | | |
| | ability Company, "L.L.C.," or "LLC.") | | |
| | | | |
| ARTICLE II - Address: | in-in-1 -60 Cab- I in-it-d I inhility Commons in | | |
| ine mailing address and street address of the | principal office of the Limited Liability Company is: | | |
| Principal Office Address: | Mailing Address: | | |
| | | | |
| 3200 N. Ocean Blvd., Apt 1503 | 3200 N. Ocean Blvd., Apt 1503 | | |
| Ft. Lauderdele, Florida 33308 | Ft. Lauderdale, Florida 33308 | | |
| | | | |
| ADDICE E III Destant A and Destant | and Open and The state of the American | | |
| (The Limited Liability Company cannot serve as its own Re | red Office, & Registered Agent's Signature: | | |
| business entity with an active Florida registration.) | position 1 to the designation and internetian or allocation | | |
| The name and the Florida street address of the | e registered agent are: | | |
| | registered agent are. | | |
| <u>Pablo A Guzman</u> | | | |
| Nan | ne registered agent are: | | |
| 3200 N. Ocean Blv | الريخ مين الأريخ ال | | |
| | address (P.O. Box NOT acceptable) | | |
| Ft. Lauderdale, Flo | rd., Apt 1503 address (P.O. Box NOT acceptable) oridal 33308 | | |
| City, State | e, and Zip | | |
| 77 | | | |
| | to accept service of process for the above stated limited | | |
| | n this certificate, I hereby accept the appointment as | | |
| | city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and | | |
| | gistered agent as provided for in Chapter 608, F.S | | |
| , | Emoreu ageru an provinca jor in Chapter 000, P.D. | | |
| | | | |

(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:

| Title: | Name and Address: |
|---------------------------------------|--|
| "MGR" = Manager | |
| "MGRM" = Manag | ng Member |
| MGR | Pablo A Guzman |
| | 3200 N. Ocean Blvd., Apt 1503 |
| | Ft. Lauderdale, Florida 33308 |
| MGR | Lucille Guzman |
| · · · · · · · · · · · · · · · · · · · | 3200 N. Ocean Blvd., Apt 1503 |
| | Ft. Lauderdale, Florida 33308 |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | *************************************** |
| (Use attachment if n | ecessary) |
| | e, if other than the date of filing: <u>May 17th, 2008</u> . (OPTIONAL) the date must be specific and cannot be more than five business days prof filing.) |
| REQUIRED SIGN | ATURE: |
| | mature of a member or an authorized representative of a member. April 23 accordance with section 608.408(3), Florida Statutes, the execution |
| Sig | nature of a member or an authorized representative of a member. |
| <i>(</i> 1. | |
| 141 | accordance with section 608.408(3), Florida Statutes, the execution |

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)