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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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B. KOHR

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**EXAMINER** 

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UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD
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UCC SERVICES
OFFICE USE ONLY

June 25, 2008

## **CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

·	Pearson Fa	mily, LLC
		•
<del>-</del>	on Copy	Type of Document  Certificate of Status
□ Certified Copy		☐ Certificate of Good Standing☐
Retrieval Reque	<u>est</u>	□ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate
□ Certified Copy		□ Other  EFFECTIVE DATE 6 24 01
NEW FILINGS		AMENDMENTS
Profit		Amendment
Non Profit		Resignation of RA Officer/Director
Limited Liability		Change of Registered Agent
Domestication		Dissolution/Withdrawal
Other		Merger
OTHER FILINGS		REGISTRATION/QUALIFICATION
Annual Reports		Foreign
Fictitious Name		Limited Liability
Name Reservation		Reinstatement
Reinstatement		Trademark
		Other
	Retrieval Reque Photocopy Certified Copy  NEW FILINGS Profit Non Profit Limited Liability Domestication Other  OTHER FILINGS Annual Reports Fictitious Name Name Reservation	Filing Evidence Plain/Confirmation Copy  Certified Copy  Retrieval Request Photocopy Certified Copy  NEW FILINGS Profit Non Profit Limited Liability Domestication Other  OTHER FILINGS Annual Reports Fictitious Name Name Reservation

ARTICLES OF ORGANIZATION FOR FLO	DRIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	PS En
The name of the Limited Liability Company is:	Allass P
Pearson Family, LLC	To F.
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	DP.
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2390 Tamiami Trall North, Suite 204	2390 Tamiami Trail North, Suite 204
Naples, FL 34103	Naples, FL 34103
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the re	red Agent. You must designate an individual or another
Charles M. Kelly, Jr.	
Name	
2390 Tamiami Trail No	orth, Suite 204
	ess (P.O. Box <u>NOT</u> acceptable)
Naples, FL 34103	FL
City, State, ar	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S.

(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:

MGRM	Dennis Pearson
	240 Meadowlark Lane
	Highland Village, TX 75077
MGRM	Kim Pearson
	1639 Nectarine Trail
	Clermont, FL 34711
	,
	· · · · · · · · · · · · · · · · · · ·
Use attachment if necessary	·)

**REQUIRED SIGNATURE:** 

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.)

Charles M. Kelly, Jr.

Typed or printed name of signce

## 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)