

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 517-6383

From: Rosa Wong, Paralegal

Account Name : AKERMAN SENTERFITT (MIAMI)

Account Number : 075471001363 Phone : (305)374-5600

Fax Number : (305)374-5095

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## PIA HOLDINGS LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$185.00

J. BRYAN

AUG 21 2008

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## ARTICLES OF ORGANIZATION PLA HOLDINGS LLC

ARTICLE I: - Name The name of the Limited Liability Company is PIA HOLDINGS LLC

ARTICLE II: - Address

ARTICLE 11: - Address
The mailing address and street address of the principal office of the Limited Liability Company is:

Attention: Carol L. Schoffel Faber c/o Akerman Senterfitt One SE Third Avenue, 25th Floor Miami, FL 33131

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

> CorpDirect Agents, Inc. 515 East Park Aveque Tallahassec, FL 32301

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

CorpDirect Agents, Inc., Registered Agent

atie Wonsch

Title: Assistant Secretary

Signed and dated this 20 day of August, 2008.

Carol L. Schoffel Faber Asq.

Authorized Representative of a Sole Momb

(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.)

> Carol L. Schoffel Faber Typed or printed name of signee