L08000098909

(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



700136968967

10/20/08--01016--018 **155.00

OR OCT 20 PH 2: 21 OR OCT 20 PH 2: 45
ONNEW THE PROPRIENT TALLAHASSEE, FLORIDA

B. KOHR

OCT 2 1 2008

EXAMINER

CORPORATE ACCESS, /

"When you need ACCESS to the world"

INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

	WALK	. IN
	PICK UP:	120/08(BN)
	CERTIFIED COPY	
	РНОТОСОРУ	
	CUS	
	FILING	LC
	ORPORATE NAME AND DOCUMENT #)	08 OCT 20 PH TALLANSSEE
		PH 2
	ORPORATE NAME AND DOCUMENT #) ORPORATE NAME AND DOCUMENT #)	ORDA 45
(C	ORPORATE NAME AND DOCUMENT #)	
(C	ORPORATE NAME AND DOCUMENT #)	
(C	ORPORATE NAME AND DOCUMENT #)	
CIAL II	NSTRUCTIONS:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nume: The name of the Limited Liability Company	y is:		
Pan Am Manager, LLC	Liability Company, "L.L.C.," or "LLC.")	···	
ARTICLE II - Address: The mailing address and street address of the	, , ,	ability Company is:	
Principal Office Address:	Mailing Address:		
501 Riverside Avenue, Seventh Floor Jacksonville, FL 322021;	361 Forest Avenue, Suite 204 Laguna Beach, CA 92651		
ARTICLE III - Registered Agent, Regist: (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	Registered Agent. You must designate an indivi	dual or another	
The name and the Florida street address of t Timothy W. Volpe	-	08 0	
	ame	AHA CT 2	
——————————————————————————————————————	enue, Seventh Floor et address (P.O. Box NOT acceptable)	OR OCT 20 PM 2: 45 SALTAHASSEE, FLORIDA	
Jacksonville	_{FL} 32202	4 2: L STA FLOR	
City, St Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap	l in this certificate, I hereby accept the	abave stated limited e appointment as	

transity 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..

Registered Agent's Signature (REQUIRED)

(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:

	DAN AN DROITEGMS AT C
MGR	PAN AM PROJECTS, LLC 361 Forest Avenue, Suite 204
	Laguna Beach, CA 92651-2148
	Cagania Beadi, OA 02001-2140
· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)
× vm × z = 00 .1 . 1 10 .1	d d L CCV - CONTIONIA
LE V: Effective date, if other	than the date of filing: (OPTIONAle must be specific and cannot be more than five business day
days after the date of filing.	

1404 (1)

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.)

Timothy W. Volpe, authorized representative

Typed or printed name of signes

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)