

L09000036246

(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:

A. LUNT

APR 15 2009

EXAMINER

Office Use Only



100149621521

04/14/09--01021--024 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR 14 PM 2:01

FILED

STEVEN A. SCIARRETTA, P.A.

ATTORNEYS AT LAW

STEVEN A. SCIARRETTA
'LL.M. IN TAXATION

THE HAMILTON BUILDING
2799 NW Boca Raton Boulevard, Suite 203
Boca Raton, Florida 33431
TELEPHONE: (561) 368-7978
TOLL FREE: (800) 545-8454
TELEFAX: (561) 368-8502

Asset Protection
Business and Taxation Planning
Probate Administration
Trusts and Estate Planning

VIA NEXT DAY UPS

April 13, 2009

State of Florida
Department of State
Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: PG Risk Management LLC

Dear Sir/Madam:

Please find enclosed for filing in duplicate Original, Articles of Organization, for the above referenced Limited Liability Company.

Also enclosed is our check for \$155.00, made payable to the Florida Department of State, which represents the \$100.00 filing fee, \$25.00 Designation of Registered Agent fee and \$30.00 Certified Copy fee.

Please return the completed paperwork to me utilizing the enclosed Pre-paid UPS envelope.

Thank you for your prompt cooperation.

Sincerely,

STEVEN A. SCIARRETTA, P.A.

Steven A. Sciarretta

SAS/dc
Enclosures

FILED
2009 APR 14 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company ("Company") is: PG Risk Management LLC

ARTICLE II - PRINCIPAL ADDRESS

The mailing address and street address of the principal place of business of the Company is:
c/o Juan Policastro, 17070 SW 74th Place, Miami, FL 33157

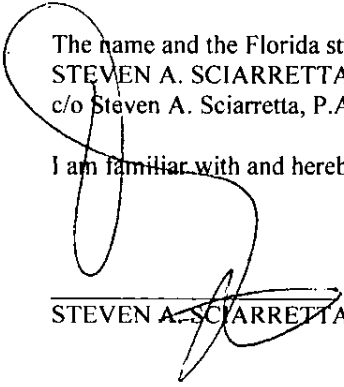
ARTICLE III - REGISTERED AGENT

The name and the Florida street address of the Registered Agent are:

STEVEN A. SCIARRETTA

c/o Steven A. Sciarretta, P.A., 2799 NW Boca Raton Blvd., Suite 203, Boca Raton, FL 33432

I am familiar with and hereby accept the obligations to act as Registered Agent.


STEVEN A. SCIARRETTA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR 14 PM 2:01

FILED

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who are to serve as manager(s) is/are:

Juan Policastro
17070 SW 74th Place
Miami, FL 33157


JUAN POLICASTRO