# L09000058287

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		ļ

Office Use Only



000150808070

2009 JUN 16 AT TO TO ACKNOWLEDGE FILING

DEPARTHENT OF STATE OF STATE OF CORPORATION OF CORP

B. KOHR
JUN 1 7 2009

EXAMINER

PILEU

SECRETARY OF STATE
ALL AHASSEF FLORID.



ACCOUNT NO. : I2000000195

REFERENCE: 037727 7527475

AUTHORIZATION : 1

COST LIMIT :

ORDER DATE: June 16, 2009

ORDER TIME : 10:37 AM

ORDER NO. : 037727-005

CUSTOMER NO: 7527475

## DOMESTIC FILING

NAME: PBRP, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:

SALAHASEE SA 2: 15

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp	any is:	
PBRP, LLC	The second second	3
(Must end with the words "Limited Liability Company	y, "Limited Company" or their abbreviation "LLC," or "(CC)	星型
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limited Liability Con	pany 19
Principal Office Address:	Mailing Address:	18 18 18 18 18 18 18 18 18 18 18 18 18 1
1001 East Telecom Drive	1001 East Telecom Drive	18 C
Boca Raton, Florida 33431	Boca Raton, Florida 33431	7
	}	
	· · · · · · · · · · · · · · · · · · ·	<b>3</b>
The name and the Florida street address of Corporation Service Con		SIM 16 TH
•	npany	MIN 16 PM 2:
Corporation Service Con	npany	PIN 16 48 5: 19
Corporation Service Con	npany Name	MI 16 PM 2: 13
1201 Hays Street Florida s Tallahassee	Name  treet address (P.O. Box <u>NOT</u> acceptable)	JIN 16 PM 2: 13

(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:

Larry D. Silver	
Larry D. Silver	
Larry D. Silver	
1001 East Telecom Drive	
Boca Raton, Florida 33431	
date of filing: (OPTIONAL	
e specific and cannot be more than five business days	
•	

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.)

By: Jesse A. Holshouser, III, CFO, Authorized Representative

Typed or printed name of signee

# 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)