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July 22, 2009

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 850-245-6051

To Whom It May Concern:

I have enclosed my articles of organization and my check for \$130 made out to the Florida Department of State. Please contact me if you have any questions. My contact information is below. Thank you and have a great day.

Ryan K. Painter

The Peacock & The Pearl

10724 High Crest CT

Howey in the Hills, FL 34734

CELL: 407-247-2210 OTHER: 321-206-6682

Email: rmendell7244@aol.com

COVER LETTER

TO:

Registration Section

Division of	f Corporations				
SUBJECT:	The Pe	acock and the Pearl, LLC.			
	Name of Limited Liability Company				
The enclosed Article	es of Organization and fee(s) are	submitted for filing.			
Please return all cor	respondence concerning this mat	er to the following:			
	Name of Limited Liability Company enclosed Articles of Organization and fee(s) are submitted for filing. See return all correspondence concerning this matter to the following: Ryan Kay Painter Name of Person Firm/Company 10724 High Crest CT Address Howey in the Hills, FL 34737 City/State and Zip Code rmendell7244@aol.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: Ryan Painter Name of Person at 407 247-2210 Area Code & Daytime Telephone Number losed is a check for the following amount: 25.00 Filling Fee \$\times\$ Certificate of Status Certificate of Status Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle				
		Name of Person			
	The Peacock and the Pearl, LLC. Name of Limited Liability Company Articles of Organization and fee(s) are submitted for filing. It correspondence concerning this matter to the following: Ryan Kay Painter Name of Person Firm/Company 10724 High Crest CT Address Howey in the Hills, FL 34737 City/State and Zip Code rmendell7244@aol.com E-mail address: (to be used for future annual report notification) primation concerning this matter, please call: Ryan Painter Name of Person at (407 247-2210 Area Code & Daytime Telephone Number check for the following amount: Ing Fee \$\subseteq\$\$ \$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Opy (additional copy is enclosed) Mailling Address Registration Section Division of Corporations P.O. Box 6327 Clifton Building				
	1072	4 High Crest CT			
 					
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<u> </u>					
For further informat	tion concerning this matter, pleas	e call:			
	Ryan Painter	at (407) 247-2210			
N	ame of Person	Area Code & Daytime Telephone Number			
Enclosed is a chec	k for the following amount:				
]\$125.00 Filing F		Certified Copy Certificate of (additional copy is enclosed) Certified Cop	Status &		
	Registration Section Division of Corporations P.O. Box 6327	Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limi		any is:	
(Must e		ck and the Pearl LLC.	")
ARTICLE II - Addr	ess:		
The mailing address a	and street address of	f the principal office of the Limite	ed Liability Company is:
Principal Office Add	dress:	Mailing Address:	
10724 High Crest C	ст	10724 High Crest CT	
Howey in the Hills.		Howey in the Hills, FL	34737
(The Limited Liability Comp business entity with an acti	pany cannot serve as its ov ve Florida registration.) orida street address o	istered Office, & Registered Ag wn Registered Agent. You must designate an of the registered agent are: an K. Painter	
	TNY	Name	TAR TAR
	40704	Little Conserver	SECOND PROPERTY.
		High Crest CT ess (P.O. Box NOT acceptable)	FLO FLO
		· · · · · · · · · · · · · · · · · · ·	ORAT 2:
_	Howey in the F	State, and Zip	QE G
liability company registered agent and statutes relating to	at the place designal agree to act in this of the proper and comp	and to accept service of process for need in this certificate, I hereby according capacity. I further agree to comply plete performance of my duties, and as registered agent as provided for 's Signature (REQUIRED)	ept the appointment as wwith the provisions of all d I am familiar with and

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member	er	
Manager	Ryan Painter	
	10724 High Crest CT	
	Howey in the Hills, FL 34737	
		
(Use attachment if necessary)		
CLE V: Effective date, if other t	than the date of filing: (OPTIONAL)	
effective date is listed, the date	must be specific and cannot be more than five business days pr	rior
0 days after the date of filing.)	\bigcirc 1. \bigcirc	
REQUIRED SIGNATURE:	() K:()	
	Turn Vainter	
Signature of a	a member or an authorized representative of a member.	adb
(In accordance	e with section 608.408(3), Florida Statutes, the execution	ii emm
of this docum	a member or an authorized representative of a member. e with section 608.408(3), Florida Statutes, the execution and the constitutes an affirmation under the penalties of perjury stated herein are true.) Ryan Kay Painter Typed or printed name of signee ASECRATARY OF STATE ORDINATION 28	
	Ryan Kay Painter	AZ
	Typed or printed name of signee	CINESCO Id
Filing Fees:	Typed or printed name of signee	Journal of the Party of the Par
C125 OO EUL - En Son Antidos	of Organization and Designation	

of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)