L0900113303

(Ře	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



000162643010

11/24/09--01017--020 **125.00

SECRETARY OF STATE

S. HAWKES

NOV 2 5 2009

EXAMINER

RONALD S. WEBSTER

COUNSELOR AT LAW

TELEPHONE: (239) 394-8999 FACSIMILE: (239) 394-3511 985 NORTH COLLIER BIATA MARÇO ISLAND, FLORIDA, 34145 E-MAIL: ronwebster@earthlink.net INFO: www.ronwebster.com

November 19, 2009

Secretary of State Division of Corporations Corporate Filings PO Box 6327 Tallahassee, FL 32314

RE: PERSISTENT LOSSES, L.L.C.

Elelian

Dear Sir or Madam:

Enclosed please find Articles of Organization together with a copy. Also enclosed is a check in the sum of \$125.00 representing the filing fee in this regard.

Should you have any questions relative to this matter, please do not hesitate to contact this office.

Sincerely,

Mary A. Adams Legal Assistant

MAA enclosure

ARTICLES OF ORGANIZATION FOR PERSISTENT LOSSES, L.L.C. A FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I

The name of the Limited Liability Company is PERSISTENT LOSSES, L.L.C

ARTICLE II

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE III

The street address and the mailing address of the Limited Liability Company is 1181 South Rogers Circle, Suite #24, Boca Raton, FL 33487.

ARTICLE IV

The street address of the initial registered office of this Limited Liability Company is 985 North Collier Boulevard, Marco Island, FL 34145 and the name of its initial Resident Agent is Ronald S. Webster.

ARTICLE V

Additional members may be admitted and the terms and conditions of the admissions shall be that each member consents in writing to the admission of the additional member.

ARTICLE VI

The remaining members of the limited liability company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company upon unanimous consent of the remaining members.

ARTICLE VII

The Limited Liability Company is to be managed by a managing member. The name and address of the member who will serve as said manager is:

Pedro L. Rosello 1181 South Rogers Circle, Suite #24 Boca Raton, Florida 33487

Pedro L. Rosello

Managing Member

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: PERSISTENT LOSSES, L.I
- 2. The name and address of the registered agent and office is

Ronald S. Webster 985 N. Collier Blvd. Marco Island, FL 34145

Having been named as the registered agent and to accept service of process for the above stated limited liability Company at the place designated in the 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.

Ronald S. Webster Registered Agent

Date: