# L09000113786

(Req	uestor's Name)	
(Add	ress)	
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PICK-UP	MAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



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SECRETARY OF STATE
FALL AHASSEF, FLORID

W09-51451

J. BRYAN

NOV 3 0.2009

**EXAMINER** 



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2009

GEORGE PANTUSO CALYX LLC PO BOX 14049 FT. PIERCE, FL 34979

SUBJECT: CALYX LLC

Ref. Number: W09000051451

FILED

09 NOV 25 PM 3: 32

SECRETARY OF STATE
SECRETARY OF STATE

We have received your document for CALYX LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #P97000003912, THE CALYX CORPORATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 709A00036255

# **COVER LETTER**

TO:	Registration S Division of Co						O9 NOV 25 SECRETAR TALLAHASS
SUBJ	ፑ <b>ረ</b> ፕ·	Calyx	c Inve	stme	nts LLC		12
3010	EC1.	Name of Limit				<u></u>	RY R
		•					THE T
The en	nclosed Articles of	Organization and fee(s) are	submitte	ed for fili	ng.		PA 3: 30 Y OF STATE SEE, FLORIE
Please	e return all corresp	ondence concerning this matt	er to the	followi	ng:		
		G		Pantus	SO		
			Name o	f Person			
		Calyx	Inves	tments	LLC		
			Firm/C	ompany			
		Р	О Вох	14049	)		
			Ado	iress			
		. Ft. F	Pierce.	, FL 34	979		
		Cit	y/State a	nd Zip Co	ode		
		georg	e@pa	ntusoir	nc.com	V	
		E-mail address: (to be used		annuai re	eport notificat	uon)	
For fu	irther information	concerning this matter, please	e call:				
	Ed E	Barenborg	at (	772	)	461-8868	
	Name	of Person		Area Co	de & Daytim	e Telephone Numbe	er .
Enclo	osed is a check for	or the following amount:					
		☐\$130.00 Filing Fee &	[□\$14	5 00 Fi	ling Fee &	[\$160.00 F	Filing Fee,
<del></del>	_	Cartificate of Status		rtified C		Certificat	e of Status &
	PEULOS FILING		(ad	ditional c	opy is enclose	•	Copy copy is enclosed)
REF #: WO9	000051451					(additional	copy is eliciosed)
		Mailing Address			Courier Ad		
		Registration Section Division of Corporations			ration Section on of Corpor		
		P.O. Box 6327		Clifton	Building		
		Tallahassee, FL 32314			Executive Co		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	is:	PAE SE
		GRE D
Calyx Invest	ments LLC	荔35
	iability Company," "L.L.C.," or "LLC.")	10 年 10
ARTICLE II - Address:		Fro
The mailing address and street address of the	e principal office of the Limited L	iability Company s:
Principal Office Address:	Mailing Address:	77-
3500 Shinn Rd.	PO Box 14049	
Ft. Pierce, FL 34945	Ft. Pierce, FL 34979	
(The Limited Liability Company cannot serve as its own Robusiness entity with an active Florida registration.)	red Office, & Registered Agent' egistered Agent. You must designate an indi-	
business entity with an active Florida registration.)  The name and the Florida street address of the George	egistered Agent. You must designate an indi- ne registered agent are:	
business entity with an active Florida registration.)  The name and the Florida street address of the George	egistered Agent. You must designate an indi-	
business entity with an active Florida registration.)  The name and the Florida street address of the George Na  3500 S	egistered Agent. You must designate an indi- ne registered agent are:  Pantuso me Shinn Rd.	
business entity with an active Florida registration.)  The name and the Florida street address of the George Na  3500 S	egistered Agent. You must designate an indi- ne registered agent are:  Pantuso me	
The name and the Florida street address of the street address of t	egistered Agent. You must designate an indirection registered agent are:  Pantuso  Bhinn Rd.  P.O. Box NOT acceptable)  FL	
The name and the Florida street address of the street address of t	egistered Agent. You must designate an indi- ne registered agent are:  Pantuso me  Shinn Rd. P.O. Box NOT acceptable)	

(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:	500 <b>0</b>
"MGRM" = Managing Member		9 80 LLA
MGRM	George Pantuso PO Box 14049 Ft. Pierce, FL 34979	9 NOV 25 PM 3: 32 SECRETARY OF STATE FALLAHASSEE. FLORID
		32
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	date of filing:e specific and cannot be more than five b	(OPTIONAL) ousiness days prior
REQUIRED SIGNATURE:	-Bux	-
(In accordance with sec	r or an authorized-representative of a member ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjur- cein are true.)	
Type Filing Fees:	George Pantuso ped or printed name of signee	
\$125.00 Filing Fee for Articles of Organ	nization and Designation	

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