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B. KOHR
FEB 1 5 2011

EXAMINER



TION SERVICE COMPANY ACCOUNT NO. : I2000000195 REFERENCE: 672836 81514A AUTHORIZATION : COST LIMIT : \$155.00 ORDER DATE : February 11, 2011 ORDER TIME : 10:49 AM ORDER NO. : 672836-005 CUSTOMER NO: 81514A DOMESTIC FILING NAME: P & R HOLDINGS, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX\_\_\_\_ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX\_\_\_\_ CERTIFIED COPY PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Jeanine Reynolds - EXT. 2933

EXAMINER'S INITIALS:



# FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2011

JEANINE REYNOLDS CSC TALLAHASSEE, FL

SUBJECT: P & R HOLDINGS, LLC Ref. Number: W11000008494

We have received your document for P & R HOLDINGS, LLC and the authorization to debit your account in the amount of \$155.00. However, the document has not been filed and is being returned for the following:

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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The existing entity with the similar name is PR HOLDINGS, LLC -- Document Number L01000012187.

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 211A00003699



### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The Name of the Limited Liability Company is: P & R HOLDINGS OF POLK COUNTY LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company are:

- a: Mailing Address: 917 N. Combee Road, Lakeland, FL 33801 b: Street Address: 917 N. Combee Road, Lakeland, FL 33801
- ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

	Coorgo Bonnanhon
-	George Pappachen
	Name
_	917 N. Combee Road
F	orida street address (Post Office Box NOT acceptable)
	Lakeland, FL 33801
_	City, State and Zip
company at the place de agree to actin this capac and complete performan	egistered agent and to accept service of process for the above stated limited llability signated in this certificate. I hereby accept the appointment as registered agent and ity. I further agree to comply with the provisions of all statutes relating to the proper ce of my duties, and I am familiar with and accept the obligations of my position as ided for in Chapter 608, F.S.

ARTICLE IV - Management (Check applicable box)

	The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.
<u> x</u>	The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.

Registered Agents Signature

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.)

> George Pappachen Typed or printed name of signee