P 9/12

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000238264 3)))



H110002382643ABC

Note: DO NOT		ELOAD button on your browser from	this page.
	Doing so will g	enerate another cover sheet.	ZS =
, Man			SE TO
To:	Division of Co	rmorations	Por w
	Fax Number	: (850) 617-6383	SES O
From:			卫公主
	Account Name	: TRIAD PROFESSIONAL SERVICES,	
	Account Number	: 120020000094	2 2
	Phone	: (770)777-2091	Em ö

\*\*Enter the email address for this business entity to be used for future

: (770)220-1943

annual report mailings. Enter only one email address please.\*\*

Email Address:

Fax Number

RECEIVED

1 SEP 30 AM 10: 25

ECRETARY OF STATE
LLAHASSEE, FLORID

## FLORIDA LIMITED LIABILITY CO. PAN AMERICAN EB-5 INVESTMENTS GROUP, LLC

Certificate of Status	0
Certifled Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

## (((H11000238264 3))) COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PAN A	MERICAN EB-5 INVES	TMENTS GROUP, LLC	
		ted Liability Company	
The enclosed Articles	of Organization and fcc(s) are	submitted for filing,	
Please return all corres	pondence concerning this ma	tter to the following;	
Thomas A, D	Pentinger		
-		Name of Person	
		Firm/Company	
		1-mm-company	
3418 Beech	<u> Trail</u>		
		Address	
Clearwater, F	L 33761		
		ty/State and Zip Code	
tdentinger@t	ampabay.rr.com	for future annual report notification)	
For further information	concerning this matter, pleas	·	
Karen Rodriguez		at (770 )777-2091	
Name	of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check f	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address 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 C Tallahassee, FL 32301	

(((H11000238264 3)))

FILED

11 SEP 30 AM 8: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H11000238264 3)))

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PAN AMERICAN EB-5 INVESTI (Must end with the words "Lit	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3418 Beech Trail	3418 Beach Trail
Ciantwater, FL 33761	Gisarwatar, FL 33761
(The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address.	s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration,	s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address.	s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Thomas A. Dentinge	s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Thomas A. Dentinge	s own Registered Agent. You must designate an individual or another ) ss of the registered agent are: er Name

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this 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 as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

(((H11000238264 3)))

(((H11000238264 3)))

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Thomas A. Dentinger 3418 Beach Trail Clearwater, FL 33781 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_ . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Thomas A. Dentinger 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)

Page 2 of 2

(((H11000238264 3)))