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(Re	equestor's Name)	
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- PICK-UP	☐ WAIT	MAIL
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K. SALY EXAMINER OCT 14 2011

COVER LETTER

TO:	Registration S Division of Co				
SUBJ	ECT. PHS (CLASS OF 86 LL	С		
0020		Name of Limit	ed Liability Con	npany	
The er	nclosed Articles o	Organization and fee(s) are	submitted for fil	ling.	
Please	return all corresp	ondence concerning this matt	er to the follow	ing:	
	Ann Mari	e <u>Dawson</u>			
			Name of Person		
	PHS CLA	SS OF 86 LLC			
			Firm/Company		
	16816 Ta	ylow Way			
			Address		
	Odessa, Fl	33556			
			y/State and Zip C	ode	
	annmane.w	Overizon.net E-mail address: (to be used in the content of the content	or future annual r	eport notification)	
For fu	rther information	concerning this matter, please		,	
Ann	Marie Daws	on	_{at (} 813	928-2852	
	Name	of Person		ode & Daytime Tel	ephone Number
Enclo	osed is a check fo	or the following amount:			
√ \$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified (iling Fee & [Copy opy 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	Regist Divisi Cliftor 2661 I	Courier Address ration Section on of Corporation n Building Executive Center assee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
PHS CLASS OF 86 LLC (Must end with the words "Limited"	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
16816 Taylow Way Odessa, FL 33556	16816 Taylow Way Odessa, FL 33556
	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of	the registered agent are:
Ann Marie Dawsor	1 · · · · · · · · · · · · · · · · · · ·
	Name
16816 Taylow	Way
Florida stre	eet address (P.O. Box NOT acceptable)
Odessa	FL 33556 第三
C	ity, State, and Zip

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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Darla Delgado 246 W. Linden Ave Burbank, CA 91502
MGRM	Ann Marie Dawson
	16816 Taylow Way
	Odessa, FL 33556
Use attachment if necessary)	
	han the date of filing: (OPTION must be specific and cannot be more than five business da

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$817.75, F.S.)

Ann Marie Dawson

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)