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D. BRUCE

FEB 15 2012

EXAMINER

EFFECTIVE DATE 02/13/12

Office Use Only

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	r: Professional Pip Services LLC		
20202	Name of Limited Liability Company		
The en	sed Articles of Organization and fee(s) are submitted for filing.		
Please	urn all correspondence concerning this matter to the following:		
	ames E. Flynn Jr.		
	Name of Person		_
	rofessional Pip Services LLC		
	Firm/Company	_	-
	501 Central Ave		
,	Address		_
Ş	. Petersburg FL 33710	12 F	15.40 ₁₀
	City/State and Zip Code	6	_]
-	eflynnlawfirm@gmail.com E-mail address: (to be used for future annual report notification)	े म	
For furt	r information concerning this matter, please call:		
Jame	E. Flynn Jr. at (912) 6043440	13	
	Name of Person Area Code & Daytime Telephone Number		
Enclos	is a check for the following amount:		
\$125.00	ling Fee \$\sum \frac{1}{4}\$130.00 Filing Fee & \$\sum \frac{1}{4}\$155.00 Filing Fee & \$\sum \frac{1}{4}\$160.00 Filing Fee & Certificate of Certificate of Certificate of Certificate of Certificate Opy (additional copy is enclosed)	Status &	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	DT	CT	F	Τ_	N.	ame
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The name of the Limited Liability Company is:

Professional Pip Services LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address: Mailing Address:				
5501 Central Avenue	5501 Central Avenue			
St. Petersburg FL 33710	St. Petersburg FL 33710			
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an active Florida registration) The name and the Florida street addre James E. Flynt	ess of the registered agent are:	another 12 FEB	<u> </u>	
	Name	7		
5501 Centra	al Ave			
Floric	da street address (P.O. Box NOT acceptable)			
St. Petersburg	_{FL} 33710	4		
****	City, 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..

Page 1 of 2

(CONTINUED)

EFFECTIVE DATE DATE 12/13/12

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	James E. Flynn Jr.
	231 Rafael Blvd NE
	St. Petersburg FL 33704
Member	Joel Berman
	7380 Pebble Beach Lane
	Seminole FL 33777
	n the date of filing: 2/13/12 . (OPTIONAL) ist be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	12 F
	C. Zari SSS
Signature of a m	ember or an authorized representative of a member.
constitutes an affirmation I am aware that any false i	n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated hereing extruction of this document information submitted in a document to the Department state felony as provided for in s.817.155, F.S.)
1 F	,
James E. F	· · · · · · · · · · · · · · · · · · ·
James E. F	· · · · · · · · · · · · · · · · · · ·
James E. F	Flynn Jr.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)