

L12000025845

2/22/12

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Address: ewnicemyers4@gmail.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
Pinecrest PB LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 FEB 22 AM 9:04

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B. BOSTICK

FEB 23 2012

EXAMINER

H12000046925

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Pinecrest PB LLC**

ARTICLE II - Address

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

Principal Office Address:

9517 South Dixie Highway

Miami, FL 33156

Mailing Address:

9517 South Dixie Highway

Miami, FL 33156

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Jennifer Cabrera

Name

9404 SW 69th Court

(P.O. Box or Mail Drop Box NOT Acceptable)

Miami, FL 33156

(City / State / 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 - Jennifer Cabrera

STATE
TALLAHASSEE, FLORIDA

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Eunice Myers - 9404 SW 69th Court, Miami, FL 33156

MGRM

Jennifer Cabrera - 9404 SW 69th Court, Miami, FL 33156

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Eunice Myers

Typed or printed name of signer

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TALLAHASSEE, FLORIDA