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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP 26 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 357921 4304155

AUTHORIZATION :

A handwritten signature in cursive script, appearing to read "Lyndell", is written over the word "AUTHORIZATION".

COST LIMIT : \$125.00

ORDER DATE : September 25, 2012

ORDER TIME : 11:11 AM

ORDER NO. : 357921-010

CUSTOMER NO: 4304155

DOMESTIC FILING

NAME: PHQ II LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes - EXT. 2920

EXAMINER'S INITIALS: _____

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: PHQ II LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Franklin S. Mitvalsky

Name of Person

Califf & Harper, P.C.

Firm/Company

506 15th Street, Suite 600

Address

Moline, Illinois 61265

City/State and Zip Code

fmitvalsky@califf.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Franklin S. Mitvalsky

Name of Person

at (309) 764-8300

Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PHQ II 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:

2426 Indian Pipe Way
Naples, FL 34105

Mailing Address:

2426 Indian Pipe Way
Naples, FL 34105

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Mary Jo England

Name

2426 Indian Pipe Way

Florida street address (P.O. Box **NOT** acceptable)

Naples

FL

34105

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.

Mary Jo England
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Mary Jo England
2426 Indian Pipe Way
Naples, Florida 34105

MGRM

Kathleen Barber
9333 Riveredge Drive
Cordova, Tennessee 38018

MGRM

Sarah England-McCullough
18175 Viceroy Drive
San Diego, California 92128

MGRM

Amy Warthen
5457 S. Independence Street
Littleton, Colorado 80123

(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. 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 s.817.155, F.S.)

Mary Jo England

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)**

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TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE