

L12000161297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

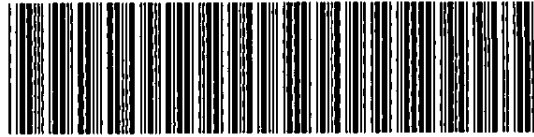
Corrected

Special Instructions to Filing Officer:

Walters

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Office Use Only



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12/28/12--01001--017 **155.00

RECEIVED
12 DEC 27 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2012 DEC 27 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DEC 28 2012

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

FILED
2012 DEC 27 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CONTACT: Kim Weidenbach

DATE: 12/27/12

REF. #: 000150.178534

CORP. NAME: PBC NOTE, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 102747 **FOR \$** 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
PBC NOTE, LLC**

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TALLAHASSEE, FLORIDA

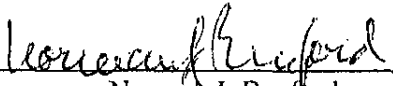
ARTICLE I. Name: The name of the Limited Liability Company is PBC NOTE, LLC (the "Company").

ARTICLE II. Address: The mailing address of the principal office of the Company is 121 Columbia Street, Cambridge, MA 02139. The street address of the principal office of the Company is 121 Columbia Street, Cambridge, MA 02139.

ARTICLE III. Registered Agent, Registered Office & Registered Agent's Signature: The name and the Florida street address of the Company's registered agent are:

Norman J. Benford
c/o Greenberg Traurig, PA
333 Avenue of the Americas, Suite 4400
Miami, FL 33131

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 in Chapter 608, Florida Statutes.



Norman J. Benford

ARTICLE IV. Management: The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of the initial managers are as follows:

Norman J. Benford
c/o Greenberg Traurig, PA
333 Avenue of the Americas, Suite 4400
Miami, FL 33131

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
this 26th day of DECEMBER, 2012.

Norman J. Benford
Norman J. Benford, Authorized Person

(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.)

MIA 182,953,891v1

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TALLAHASSEE, FLORIDA