

L130000048362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

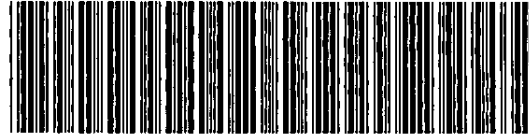
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13 APR -1 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. JEFFREY REYNOLDS

ATTORNEY AT LAW
924 N. PALAFOX STREET
PENSACOLA, FLORIDA 32501

GENERAL PRACTICE

Injury Cases
Divorce/Family Law
Bankruptcy
Criminal Defense
Probate/Wills
Maritime/Offshore
Social Security

March 29, 2013

(850) 434-2522

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: PCOLA GROUP, LLC

Gentlemen:

The enclosed Articles of Organization and \$125.00 filing fee are submitted for filing.

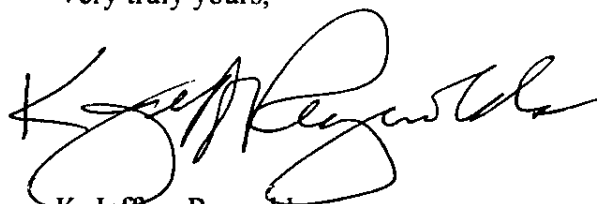
Please return all correspondence concerning this matter to:

K. Jeffrey Reynolds
Attorney at Law
924 North Palafox Street
Pensacola, FL 32501
(850) 434-2522

Email: kjeffreynolds@att.net

Thank you for your attention to this matter.

Very truly yours,



K. Jeffrey Reynolds

KJR/kmp

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13 APR - 1 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
PCOLA GROUP, LLC**

The undersigned subscriber to these Articles of Organization hereby forms a Limited Liability Company under Chapter 608, Florida Statutes.

ARTICLE I

Name of the Limited Liability Company

The name of this Limited Liability Company is PCola Group, LLC.

ARTICLE II

Address

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

Principal Office Address:

1811 East Lee Street
Pensacola, Florida 32503.

Mailing Address:

P.O. Box 53
Gulf Breeze, Florida 32562

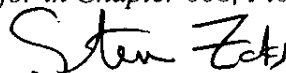
ARTICLE III

Registered Agent, Registered Office & Registered Agent's Signature

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

Steven Zaks
1811 East Lee Street
Pensacola, Florida 32503.

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, Florida Statutes.



Registered Agent's Signature

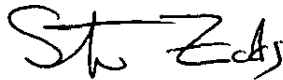
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV
Manager(s) or Managing Members(s)

The management of this Limited Liability Company is reserved to the members. The name and address of each Manager (MGR) or Managing Member (MGRM) is as follows:

<u>Title</u>	<u>Name and Address</u>
MGRM	Steven Zaks P.O. Box 53 Gulf Breeze, Florida 32562

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 in s.817.155, F.S.)

STEVEN ZAKS

Typed or printed name of signee

**ARTICLES OF ORGANIZATION
FOR
PCOLA GROUP, LLC**

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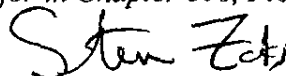
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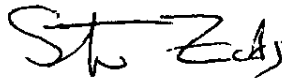
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STEVEN ZAKS

Typed or printed name of signee