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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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08/05/13--01023--017 **125.00

DIVISION OF CORPORATIONS

AUG - 6 2013

T. HAMPTON

(850) 245-6051.

COVER LETTER

TO: Registration Division of	Section Corporations	
SUBJECT: Pati	erDan, LLC	
SUBJECT:		ted Liability Company
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corre	spondence concerning this mat	ter to the following:
Daniel	Berman	
		Name of Person
7700 1	25th Stroot	Firm/Company
7700 1	35th Street	Address
Semin	ole, FL 33776-	
		ty/State and Zip Code
danberm	an@ymail.com	C. C
For further information	n concerning this matter, please	for future annual report notification)
Daniel Bei	-	
	e of Person	_ at (
Enclosed is a check	for the following amount:	
\$125.00 Filing Fee	•	□\$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 Compar	ny is:	
PatterDan, LLC		
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Lial	bility Company is:
Principal Office Address:	Mailing Address:	
7700 135th Street	7700 135th Street	
Sominole, FL 33776-3907	Sominole, FL 33776-3907	
		
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Registered Agent. You must designate an individual	
The name and the Florida street address of	the registered agent are:	
Daniel Berman		
1	Name	
7700 135th Street		
Florida stre	eet address (P.O. Box NOT acceptable)	
Seminole	_{FL} 33776-3907	
Ci	ty, State, and Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this call statutes relating to the proper and con and accept the obligations of my position	d in this certificate, I hereby accept the apacity. I further agree to comply with aplete performance of my duties, and I	e appointment as h the provisions of I am familiar with
Registered Agent's	Signature (REQUIRED)	SECRE TO DIVISION O
	TINUED) e1of2	-5 PMIS
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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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
President	Daniel Berman	
	7700 135th Street	
	Seminole, FL 33776-3907	
Vice-President	Pattera Berman	
	7700 135th Street	
	Seminole, FL 33776-3907	<u> </u>
(Use attachment if necessary)		
CLE V: Effective date, if other than t effective date is listed, the date mu	the date of filing: ust be specific and cannot be more than)	(OPTIONAL) a five business d
CLE V: Effective date, if other than t effective date is listed, the date mu	ust be specific and cannot be more than	(OPTIONAL) a five business da
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\$ 5.00 Certificate of Status (Optional)