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TO:

Registration Section
Division of Corporations

SURIFCT

PALM BEACH INVESTORS GROUP, L.L.C.

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:

ROBERT DI VINCENT, JR. Name of Person 142 MAGEE ROAD Address RINGWOOD N.J. 07450 City/State and Zip Code froehcpa@embarqmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROBERT DI VINCENT, JR Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount:

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 Comp	pany is:
PALM BEACH INVESTMENT GROUP, L.LC.	
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
The maning address and street address o	is the principal office of the Elithica Elability Company is.
Principal Office Address:	Mailing Address:
8349 150TH COURT NORTH	142 MAGEE ROAD
WEST PALM BEACH, FL 33448	RINGWOOD, N.J. 07450
The name and the Florida street address of DEAN DI VINCENT	of the registered agent are:
	Name
8349 150TH COURT NOF	RTH
-	treet address (P.O. Box NOT acceptable)
West Palm Bea	ch _{FL} 33418
	City, State, and Zip
Having been named as registered agent of	

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

)
•

. (OPTIONAL t be more than five business

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.)

ROBERT DI VINCENT, JR.

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)