L14000003754

(Requestor's Name)
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PPICK-UP WAIT MAIL
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2014 JEB-7 MID 23



ACCOUNT NO. : I2000000	0195
REFERENCE : 948551	7866623
AUTHORIZATION :	
COST LIMIT : \$ 125.00	· · · · · · · · · · · · · · · · · · ·
ORDER DATE : January 2, 2014	
ORDER TIME : 2:55 PM	
ORDER NO. : 948551-035	F.3
CUSTOMER NO: 7866623	Same of the same o
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DOMESTIC FILING	
NAME: PINE AMBERLY HOLDIN	•
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNE XX ARTICLES OF ORGANIZATION	RSHIP
PLEASE RETURN THE FOLLOWING AS PROOF	OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	ł
CONTACT PERSON: Susie Knight - EXT.	52956
EXAMIN	ER'S INITIALS:

## COVER LETTER

	registration Section vivision of Corporations	
SUBJECT	PINE AMBERLY HOLDINGS, LLC	
oebone.	Name of Limited Liability Company	
The enclos	sed Articles of Organization and fee(s) are submitted for filing.	
Please retu	rn all correspondence concerning this matter to the following:	
	Kathleen Leuschel	
	Name of Person	
	Sabal Financial Group, L.P.	
	Firm/Company	1
	4675 MacArthur Court, Suite 1550	
	Address	. * *
	Newport Beach, CA 92660	
	City/State and Zip Code	
	angle.smith@sabalfin.com; lathy. ieuschel@sabalfin.com  E-mail address: (to be used for future annual report notifica	tion)
For further	information concerning this matter, please call:	······ <b>,</b>
Kathleen i		
•	Name of Person Area Code Daytime Telephone Num	ber
Enclosed is	a check for the following amount:	
\$125.00 Fi	Certificate of Status Certified Copy Cert  (additional copy is enclosed) Certified Copy	1.00 Filing Fee, ificate of Status & ified Copy onal copy is enclose
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limite	ed Liability Company is:		
PINE AMBERLY HO		Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addre	ss:	ncipal office of the Limited Liability Company is:	
Principal Office Addr	ess:	Mailing Address:	
4675 MacArthur Cou Newport Beach, CA		4675 MacArthur Court, Sulte 1550 Newport Beach, CA 92660	
(The Limited Liability another business entity	Company cannot serve as with an active Florida reg	,	dividual or
The name and the right	da street address of the reg Corporation Service Co		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Corporation Service Co	Name	
	1201 Hays Street		
		O. Box <u>NOT</u> acceptable)	) \(\sigma_{\text{max}}\)
	Tallahassee	FL 32301	1,149
	City	Zip	
the place designated capacity. I further ag	d in this certificate, I hereb gree to comply with the pro- om familiar with and accept Corporation Scrvice By:	coept service of process for the above stated limited lifty accept the appointment as registered agent and agricultures of all statutes relating to the proper and compute the obligations of my position as registered agent as Chapter 605, F.S  Company  ASOLATIN VIOLE  S Signature (REQUIRED)	ree to act in this plete performance or provided for in

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR — Manager MGR	Sabal Financial Group, L.P.	
	4675 MacArthur Court, Suite 1550	
	Newport Beach, CA 92660	
AMBR	Pine Holdco, LLC	,
7 11712	4675 MacArthur ourt, Suite 1550	
	Newport Beach, CA 92660	
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- <del></del>		
	<del>-                                    </del>	
EV: Effective date, if other than the dat ctive date is listed, the date must be s	e of filing:	 or 90
EV: Effective date, if other than the datective date is listed, the date must be suffiling.)  EVI: Other provisions, if any.	e of filing:, (OPTIONAL) pecific and cannot be more than five business days prior to c  agent of the Company for purposes of the Company's bu	
ective date is listed, the date must be sof filing.)  E VI: Other provisions, if any.  The most and the Manager are each an experience of the manager are experienced at the experience of the manager are experienced at the experience of the experi	pecific and cannot be more than five business days prior to o	
EV: Effective date, if other than the date ctive date is listed, the date must be so f filing.)  EVI: Other provisions, if any.  The and the Manager are each an experience of a manager and the constitutes an affirmation of a manager that any false is	pecific and cannot be more than five business days prior to describe agent of the Company for purposes of the Company's bu	usine
EV: Effective date, if other than the date clive date is listed, the date must be so filling.)  EVI: Other provisions, if any.  BEQUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false i constitutes a third degree in	agent of the Company for purposes of the Company's but the company for purposes of the Company's but the company's but the facts stated herein are trunformation submitted in a document to the Department of Statelony as provided Representative  chel, Authorized Representative	usine
EV: Effective date, if other than the date clive date is listed, the date must be so filling.)  EVI: Other provisions, if any.  BEQUIRED SIGNATURE:  Signature of a magnetic constitutes an affirmation of a magnetic degree in the constitutes at third degree in the constitutes at the const	agent of the Company for purposes of the Company's but the Company for purposes of the Company's but the Company's but the company for purposes of the Company's but the company's but the company for purposes of the Company's but the company for purposes of the Company's but the company for an authorized representative of a member.  605.0203 (1) (b), Florida Statutes, the execution of this document to the penaltiment of Statutes, as provided for in s.817.155, F.S.)	usine

Page 2 of 2