

L14000003771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

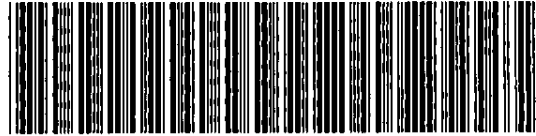
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 JAN -7 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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14 JAN -7 PM 4:26



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 948551 7866623

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : January 2, 2014

ORDER TIME : 3:06 PM

ORDER NO. : 948551-155

CUSTOMER NO: 7866623

DOMESTIC FILING

NAME: PINE SOUTH LAKE HOLDINGS, LLC

EFFECTIVE DATE:

\_\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX \_\_\_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** PINE SOUTH LAKE HOLDINGS, LLC  
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:

Kathleen Leuschel  
Name of Person

Sabal Financial Group, L.P.  
Firm/Company

4675 MacArthur Court, Suite 1550  
Address

Newport Beach, CA 92660  
City/State and Zip Code

angie.smith@sabalfin.com; lathy.leuschel@sabalfin.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen Leuschel                      949                      381-2784  
Name of Person                      at (                      )                      Daytime Telephone Number

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 Company is:

PINE SOUTH LAKE HOLDINGS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4675 MacArthur Court, Suite 1550  
Newport Beach, CA 92660

4675 MacArthur Court, Suite 1550  
Newport Beach, CA 92660

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation Service Company  
Name  
1201 Hays Street  
Florida street address (P.O. Box **NOT** acceptable)  
Tallahassee FL 32301  
City Zip

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*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 605, F.S..*

Corporation Service Company

By: [Signature] Sue G. Knight  
Registered Agent's Signature (REQUIRED) Assistant Vice President

(CONTINUED)

