

L15000049973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

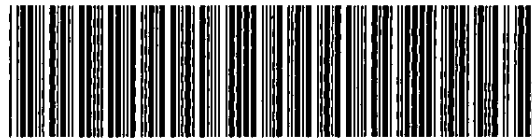
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 23 2015
J. HARRIS

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DEPARTMENT OF STATE
15 MAR 20 PM 4:50
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2015 MAR 20 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET

ACCT. #FCA-23

CONTACT: KIM WEIDENBACH

DATE: 03/20/2015

REF. #: 9466235

CORP. NAME: PAM-FP FOURTEEN, LLC

☐ ARTICLES OF INCORPORATION ☐ ARTICLES OF AMENDMENT ☐ ARTICLES OF DISSOLUTION

☐ ANNUAL REPORT ☐ TRADEMARK/SERVICE MARK ☐ FICTITIOUS NAME

☐ FOREIGN QUALIFICATION ☐ LIMITED PARTNERSHIP ☒ LIMITED LIABILITY

☐ REINSTATEMENT ☐ MERGER ☐ WITHDRAWAL

☐ CERTIFICATE OF CANCELLATION

☐ OTHER:

STATE FEES PREPAID WITH CHECK # 70037393 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

☐ CERTIFIED COPY
☐ CERTIFICATE OF GOOD STANDING
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

Examiner's Initials

ARTICLES OF ORGANIZATION

PAM-FP FOURTEEN, LLC,
a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

PAM-FP FOURTEEN, LLC

ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The street address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

2665 South Bayshore Drive
Suite 1020
Coconut Grove, Florida 33133

and, the mailing address of the Limited Liability Company shall be:

P.O. Box 330609
Miami, Florida 33233

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

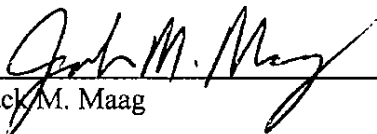
Gregory M. Marks
240 South Pineapple Avenue
10th Floor
Sarasota, Florida 34236

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ARTICLE IV
MANAGEMENT

The Company is a manager-managed limited liability company for purposes of the Florida Revised Limited Liability Company Act and its manager(s) shall be appointed and serve in accordance with the terms and conditions set forth in the Company's operating agreement, as the same may be amended from time to time.

These Articles of Organization have been executed as of the 20th day of March, 2015.



Jack M. Maag
"AUTHORIZED REPRESENTATIVE"

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0203 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

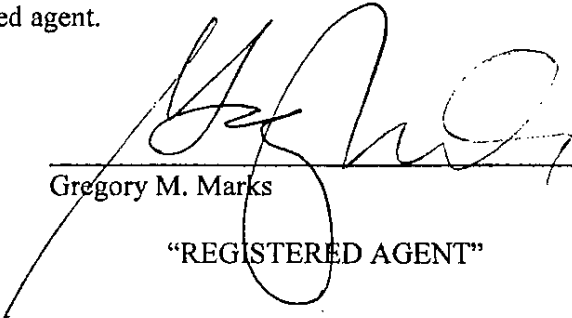
PAM-FP FOURTEEN, LLC

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

Gregory M. Marks
240 South Pineapple Avenue
10th Floor
Sarasota, Florida 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: March 20, 2015



Gregory M. Marks

"REGISTERED AGENT"

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