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DATE:

6/4/15

NAME: PANACAVALLO, LLC

TYPE OF FILING: ARTICLES

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ACCOUNT: FCA000000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE 1 - Name:** 

PANACAVALLO, LLC	: '4 11'.1''.	-
(Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
12230 Forest Hill Blvd., Suite 122 Wellington, FL 33414	12230 Forest Hill Blvd., Suite 122 Wellington, FL 33414	<del>-</del> -
		_
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as it another business entity with an active Florida regis	s own Registered Agent. You must designate an indiv	idual or द्धः के
(The Limited Liability Company cannot serve as it	ts own Registered Agent. You must designate an indivistration.) istered agent are:	35 JUH
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(The Limited Liability Company cannot serve as it another business entity with an active Florida registre and the Florida street address of the registre and the Flori	is own Registered Agent. You must designate an indivistration.) istered agent are:	15 UH -4 M

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 Chupter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Fitle:</u> "AMBR" ≈ Authorized Me	Name and Address:
'MGR" = Manager	
MGR	Michael C. Davis
	12230 Forest Hill Blvd., Suite 122 Wellington, FL 33414
	vvenington, FL 33414
<del></del>	
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