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PALM MOUNTAIN GROUP, LLC

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COVER LETTER

TO:	Registration Section . Division of Corporations			
SUBJE	PALM MOUNTAIN GROUP, LL	.c		
30112		imited Liabi	lity Company	
The end	closed Articles of Organization and fee(s)	are submitted	I for filing.	
Please	return all correspondence concerning this i	matter to the	following:	
	PAUL M. PUGLIESE, ESQUIRE			
	<u></u>	Name of	Person	
	PUGLIESE, FINNEGAN, SHAFFEI	R & FEREN	TINO LLC	
		Firm/Co	ompany	-
	SUITE 500 RIVERSIDE COMMON	IS, 575 PIER	CE STREET	
		Addı	ess	
	KINGSTON, PA 18704			
	pugliese@pfslawyer.com	City/State ar	nd Zip Code	
	E-mail address: (to be use	ed for future	annual report notifica	ation)
For furth	er information concerning this matter, plea	ise call:		
	Paul M. Pugliese	570	283-1800	
	Name of Person	Area Code	Daytime Telepho	one Number
Enclose	ed is a check for the following amount:			
\$125.00	0 Filing Fee \$130.00 Filing Fee & Certificate of Status	LCertifi	00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	nter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

PALM MOUNTAIN GROUP, LLC (Must end with the words "Limited Lial	hility Company, "L.L.C.," or "LLC.")
	only company, Bibliot, or Ebo.
TICLE II - Address:	an at the rather of
mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
454 South Main Street	454 South Main Street
PO Box 454	PO Box 454
Wilkes-Barre, PA 18703	Wilkes-Barre, PA 18703

Name

12940 Brynwood

Florida street address (P.O. Box NOT acceptable)

Palm Beach Gardens FL 33418

City State Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

HVISION OF CORPORATIONS

MGR RICHARD A. ROSE, JR. 454 SOUTH MAIN STREET WILKES-BARRE, PA 18703 Use attachment if necessary) V: Effective date, if other than the date of filing:
Use attachment if necessary)
Use attachment if necessary)
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V: Effective date, if other than the date of filing: (OPTIONAL
VI: Other provisions, if any.
EOUIRED SIGNATURE:
- Jose f.
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida St I am aware that any false information submitted in a document to the Department o constitutes a third degree felony as provided for in s.817.155, F.S.
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Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida St I am aware that any false information submitted in a document to the Department o constitutes a third degree felony as provided for in s.817.155, F.S. RICHARD A. ROSE, JR. Typed or printed name of signee Filing Fees:

ARTICLE IV-

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