

L15000213471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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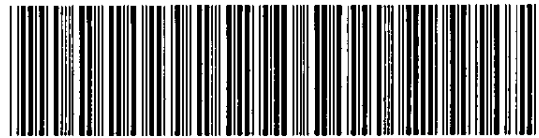
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

DEC 31 2015

T SCHROEDER

**Wolters Kluwer**

2075 Centre Pointe Boulevard, Tallahassee, FL, 32308

850-205-8842

<b>PSB FO, LLC</b>		

**Thank you!**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Profit                           | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                |
| <input type="checkbox"/> Nonprofit                        |   |  |
| <input type="checkbox"/> Foreign                          | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                  |
|   | <input type="checkbox"/> Reinstatement          |  |
| <input type="checkbox"/> Limited Partnership              | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                 |
| <input checked="" type="checkbox"/> <b>LLC</b>            | <input type="checkbox"/> Name Registration      |  |
| <b>Formation</b>  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                   |
| <input checked="" type="checkbox"/> <b>Certified Copy</b> | <input type="checkbox"/> Photocopies            | <input checked="" type="checkbox"/> <b>CUS</b> |
| <b>New Formation</b>                                      |   |  |
| <input type="checkbox"/> Call When Ready                  | <input type="checkbox"/> Call If Problem        |  |
| <input checked="" type="checkbox"/> Walk In               | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up    |
| <input type="checkbox"/> Mail Out                         |   |  |

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W.P. Verifier _____		Amount: \$ _____

ARTICLES OF ORGANIZATION  
OF  
PSB FO, LLC

1. The name of the limited liability company is PSB FO, LLC.
2. The mailing address and the street address of the principal office of the limited liability company are:

21200 NE 38th Avenue  
Suite 2101  
Aventura, FL 33180-3785.

3. The name and street address of the initial registered agent of the limited liability company are:


Paul S. Bachow  
21200 NE 38th Avenue  
Suite 2101  
Aventura, FL 33180-3785.

4. The limited liability company shall be managed by its manager. The name and address of the manager of the limited liability company are:

Paul S. Bachow  
21200 NE 38th Avenue  
Suite 2101  
Aventura, FL 33180-3785.

5. The Effective date of this filing shall be January 1, 2016.

Dated: December 29, 2015.

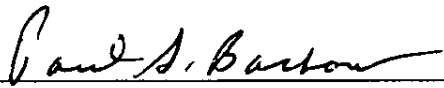
  
\_\_\_\_\_  
Paul S. Bachow  
Authorized Representative

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CLERK OF THE COURT

**ACCEPTANCE OF APPOINTMENT  
AS REGISTERED AGENT**

The undersigned, Paul S. Bachow, which has been designated in the foregoing Articles of Incorporation as registered agent for the corporation therein named, hereby agrees that (i) he accepts such appointment as registered agent and will accept service of process for and on behalf of said corporation, and (ii) he is familiar with and will comply with any and all laws relating to the complete and proper performance of the duties and obligations of a registered agent of a Florida corporation.

Dated: December 29, 2015.

  
\_\_\_\_\_  
Paul S. Bachow

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