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# CORPORATE ACCESS, \_

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: P.E.G.A.D.I., PLLC
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:
Donald D. Wilsom Ir.  Name of Person
,
Donald D. Wilson Ir., CPA
•
6705 Red Road, Suite 608
Address
Coral Gables, PL 33143 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donald Wilson, N. at 305 668-3099  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  S160.00 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/Courler Address  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301



FILED 16 OCT 13 PK 3-22

October 12, 2016

CORPORATE ACCESS, INC.

SUBJECT: P.G.D., PLLC Ref. Number: W16000069924 DERKEIKERI OF SU

We have received your document for P.G.D., PLLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 416A00021989

## EFFECTIVE DATE 10/11/10

FILED

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 16 007 13 PM 3-22

ARTICLE I - Name: The name of the Limited Liability Company is:	
P.E.G. A.D.I., 7	LLC ited Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address:	alling Address:
6705 Red Road, Suite 608 Caral Galler, Pt 32143	6705 Ded Road Suite 608 Comal Gaster, FL 33143
ARTICLE III - Registered Agent, Registered Offic (The Limited Liability Company cannot serve as its of another business entity with an active Florida registra	wn Registered Agent. You must designate an individual or
The name and the Florida street address of the register Donald	D. Wilson, Ir
6705	Red Road, Suite 608 Box NOT acceptable)
Florida street address (P.O. 1	Box NOT acceptable)
(oval Cab	Les FL 33143 Zip
City	Zip
Having been named as registered agent and to accent	t service of process for the above stated limited liability company

Having been named as registered agent and to accept service of process for the above stated limited liability company of 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

Title:		Name and Address:		
"AMBR" = Authorized I "MGR" = Manager M 6 2	4ember	Donald D. 6705 Red R Oval Guster,	Wilson, Saith	TV.
(Use attachment if necess	ary)			
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