Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353 Phone

: (800)221-2972

Fax Number

: (888)692-9256

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

mail A	ddress:_				
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FLORIDA LIMITED LIABILITY CO. PXP CONSTRUCTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

From 7188897420 1.718.889.7420 Fri Jun 2 12:38:35 2017 MDT Page 2 of 3

From:

06/02/2017 13:39

#205 P.002/003

ARTICLES OF ORGANIZATION FOR ILORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:	,		
PXP Construction LLC				
(Musi enil w	lth the words "Limit	ed Lishility Compan	y, "L.L.C.," or "LLC.")	
ARTICLE II - Addressi The mailing address and street add	hess of the principal	office of the Limited	Liability Company is:	
Principal	Office Address:		Mailing Address:	
1211 English Bluffs C	ourt	121	t English Bluffs Court	<u></u> .
Brandon FL 33511		Bra	ndon FL 33511	_
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an ad The name and the Florida street ad	annot serve as its ov live Florida registral	on Registered Agent. tion.)	nt's Signatures You must designote an individual or	
	Paul Palazzolo			
	1 and 1 detroyale	Name.		
	1211 English Bluff	's Court		
	Florida street addr	=== (P.O. Box <u>NOT</u> :	acceptable)	
	Brandoa	rt	.33511,	
	City	Śtale	Zip	

Floring 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 bereby accept the appointment as registered agent and agree to act in this corpority. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my diffes, and I am fundifier with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED).

From:

06/02/2017 13:39 #205 P.003/003

"AMBR" = Authorized Member	Name and Address:
"MCR" = Manager	
MGR	Paul Palazzolo
•	1211 English Bluffs Court
	Brandon FL 335\1
<u> </u>	

<u> </u>	
	
(Use attachment if necessary)	
,	lete of filing:
EV: Effective date, if other them the certive date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the c ective date is listed, the date must be of filing.)	of meet the applicable statutory filing requirements, this date will no
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EV: Effective date, if other than the certive date is listed, the date must be of filing.) The date inserted in this block does not ment's effective date on the Department's effective date on the Department. EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exceed any owner that any if	of meet the applicable statutory filing requirements, this date will no ent of State's records.
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Page 2 of 2