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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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

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FLORIDA LIMITED LIABILITY CO. PC Riverfront CA, LLC

Certificate of Status	1
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K. Brumbley

ARTICLES OF	PORGANIZATION	ORFLORIDALIM	ITTED LIABILITY COMPANY	+
ARTICLE I - Name: The name of the Limited Liability			•	
PC Riverfront CA, L				
(Must conti	tin the words "Limit	ed Liability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ac	ldress of the princips	office of the Liz	nited Liability Company is:	
Principa	Office Address:		Mailing Address:	
7900 Gindes Road, St	nite 540		7900 Glades Road, Strine 540	
Bocs Raton, FL 3343	4		Boca Raton, FL 33434	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an of The name and the Florida street a	amnot serve as its ov stive Florida registra	мп Registered Ag tion.)	Agent's Signature: ent. You must designate an individu	ani or
	Todd Rosenberg			
	A A MILE STATE OF THE STATE OF	Name		
	7900 Glades Road,	Suite 540		
	Florida street addre		T acceptable)	
	Boca Raton	PL	33434	

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.

State

Zip

City

Registered Agent's Signature (REQUIRED)

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SECRETARY OF STATE

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