

L18000079432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

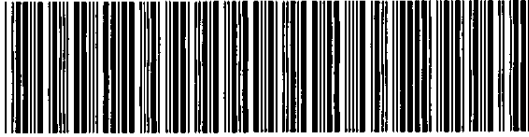
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
18 MAR 30 PM 1:00  
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18 MAR 30 PM 1:59  
SECRETARY OF STATE  
TAMM BLDG. 1ST FLOOR  
TALLAHASSEE, FLORIDA

MAR 30 2018  
T SCHROEDER

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PL RENTALS, LLC

Signature \_\_\_\_\_

Requested by: BA      03/30/18  
Name                      Date                      Time

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

- \_\_\_\_\_ Art of Inc. File \_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- \_\_\_\_\_ Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- \_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION**

**OF**

**PL RENTALS, LLC**

**ARTICLE I**

**NAME**

The name of this Limited Liability Company is PL Rentals, LLC

**ARTICLE II**

**ADDRESS**

The Mailing address and street address of the principal office of the Limited Liability Company is:

7695 S.W. 104<sup>th</sup> Street  
Suite 210  
Miami, FL 33156

**ARTICLE III**

**REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Eric P. Littman  
7695 S.W. 104<sup>th</sup> Street  
Suite 210  
Miami, FL 33156

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.

/s/Eric P. Littman  
Eric P. Littman

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**ARTICLE IV**

**MANAGER**

The name and address of each Member and Manager is as follows:

Paul Lucas 7500 S.W. 171 <sup>st</sup> Street Miami, FI 33157	Member/Manager
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Michael Lucas 7500 S.W. 171 Street Miami, FI 33157	Memeber
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IN WITNESS WHEREOF, I have hereunto executed these Articles of Organization on this 30<sup>th</sup> day of March, 2018

By: /s/Paul Lucas  
Paul Lucas, Manager

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PAUL LUCAS, MANAGER