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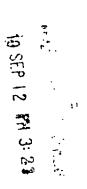
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COVER LETTER

19 SEP 12 PA 3: 23

SUBJECT	PGK Properties, LLC Name of Limited Liability Company
	Cane of Limited Hadriky Company
The enclos	ed Articles of Organization and fee(s) are submitted for filling.
Please retu	m all correspondence concerning this matter to the following:
	Adam A. Czaya, Esq.
	Name of Person
	Keith Taylor Law Group, P.A.
	Firm/Company
	PO Box 2016
	Address
	Lecanto, FL 34460
	City/State and Zip Code kallenbach@mindspring.com
=	E-mail address: (to be used for future annual report notification)
or further in	nformation concerning this matter, please call:
	Adam A. Czaya 352 795-0404
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
	•
\$125.00 Fi	ling Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

TO:

New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ARTICLE 1 - Name: The name of the Limited Liability		FLORIDA LIMITED	LIABILITY COMPANY	19 SEP		PH 3: 23
PGK Properties, LLC		CHE O		·		
(Musi conta	ain the words "Limited	Liability Company,	"L.L.C., or "LLC.")			
ARTICLE II - Address: The mailing address and street ac	ddress of the principal	office of the Limited	Liability Company is:			
Principa	al Office Address:		Mailing Add	<u>ress</u> :		
4489 W. Horseshoe [Drive	448	W. Horseshoe Drive			
Beverly Hills, FL 344	165		rly Hills, FL 34465			
	·					
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its ow ctive Florida registrati	n Registered Agent. on.) d agent are:	You must designate an in	dividual or		
		Name				
	1143 N. Lyle Avent		•			
	Florida street addre		cceptable)			
	Crystal River	FL	34429			
	City	State	Zip			
Having been named as registered a place designated in this vertificate, further agree to comply with the pro im familiar with and accept the obt	I hereby accept the app ovisions of all statutes t ligations offmy position	pointment as register relating to the proper	ed agent and agree to act and complete performan is provided for in Chapte	in this capacity. ce of my duties, a	1	

(CONTINUED)

	son authorized to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Patricia G. Kallenbach
AMBR	4489 W. Horseshoc Drive
	Beverly Hills, FL 34465
	DCVCX) TXIII3
	
	the data of files:
Hective date is listed, the date muse e of filing.) If the date inscrted in this block do	the date of filing:
e of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's offer provisions, if any.	es not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.
e of filing.) If the date inserted in this block document's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.
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e of filing.) If the date inserted in this block document's effective date on the Depa CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	ses not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.
e of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's Electric date on the Department's Signature Signature This document	of a member or an authorized representative of a member.
e of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE: Signature This document is large aware that	ses not meet the applicable statutory filing requirements, this date will not be listed as artment of State's records.

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Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.60 Certificate of Status (Optional)