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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	IAIL
(Business Entity Name)	
(Document Number)	
Certificates of Status	
Special Instructions to Filing Officer	
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Office Use Only



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2020 JUN 24 KM ID 48

2020 JAN 24 FM 12

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE: 151166 8279736
AUTHORIZATION: Spresselendo
COST LIMIT : (\$\)\1.25.00
ORDER DATE : January 24, 2020
ORDER TIME : 9:59 AM
ORDER NO. : 151166-005
CUSTOMER NO: 8279736
DOMESTIC FILING
NAME: PUTNAM MANAGEMENT GROUP LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Kadesha Roberson - EXT.
EXAMINER'S INITIALS:

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Patram Management Group LLC Name of Limited Hability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Cynthia T Putname Name of Person	-
Firm/Company	-
PO Box 2380	_
Address	
Vero Beach FL 32961 City/State and Zip Code	-
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Cynthia Putan (772) 766-5397 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee Certificate of Status S155.00 Filing Fee & Certified Copy (additional copy is enclosed) Certifi	ć
Mailing Address New Filing Section New Filing Section Division	
Division of Corporations The Centre of Tallahassee	

P.O. Box 6327

Tallahassee, FL 32314

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
(Must conatin the words "Limited Liability Co	mpany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the	
Principal Office Address:	Mailing Address:
2875 Saint Barts Sp	9080x 2380

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation Service	Company	
	Name	
1201 Hays Street		
Florida street addres	ss (P.O. Box NOT ac	ceptable)
Tallahassee	FL_	32301
City	State	Zip

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..

Corporation Service Company

Kadesha Roberson
Asst. Vice President

Registered Agent's Signature (REOUIRED)

(CONTINUED)

2020 JAN 24 PM 12: 19

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Mgr Wanger	Robert E Putgan 2875 Saint Barts Sp Vero Beach, Fr 32967
Mgr	Cynthia I Putpan Vero Beach, Fi 32967
-	
EV: Effective date, if other than	the date of filing: (OPTIONAL)
ctive date is listed, the date mu f filing.)	est be specific and cannot be more than five business days prior to or 90 does not meet the applicable statutory filing requirements, this date will not be
E V: Effective date, if other than active date is listed, the date must filling.) the date inserted in this block donent's effective date on the Dep.	est be specific and cannot be more than five business days prior to or 90 does not meet the applicable statutory filing requirements, this date will not be
E V: Effective date, if other than ctive date is listed, the date mu f filing.) the date inserted in this block donent's effective date on the Depte VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is a may aware that a	est be specific and cannot be more than five business days prior to or 90 does not meet the applicable statutory filing requirements, this date will not be

ARTICLE IV-