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21 JUN 11 PM 12: 43 SLUBLIABLE STATE ALLAHASSEE, FLORIDA

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COVER LETTER

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ne following:
Diller of Person
COMPANY
. ,
Juno Dr North
Beach Fla 33408 and Zip Code ORKing. Net re annual report notification)
and Zip Code
re annual report notification)
Daytime Telephone Number
/ .
if 55.00 Filing Fee & if \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Street Address
New Filing Section Division The Centre of Tallahassee

Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
PRE SO F/O L.L.C.
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
1470 Villa Juno DR North 1470 Villa Juno Dr Juno Beach Florida Juno Brach 9low 33408 33
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:
Roller Diller
Name
Florida street address of the registered agent are: Beffy Di Hek
Florida street address (P.O. Box NOT acceptable)
Juno Beach Florida 33408
City State Zip
laving been named as registered agent and to accept service of process for the above stated limited liability company at the lace designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I wither agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I m familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S Betty Diller Registered Agent's Signature (REQUIRED)

(CONTINUED)

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The name and address of each person authorized to manage and control the Limited Liability Company:

**MIRK" = Manager A MBR **MORK	Title:	utharized Member	Name and Address:
CLE V: Effective date, if other than the date of tiling: Greetive date is listed, the date must be specific and capnot be more than five business days prior to or 90 days after ate of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ocument's effective date on the Department of State's records. REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S. Typed or printed name of signec Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent			
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