

L980000002882

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Attorneys at Law

November 18, 1998

Florida Department of State  
Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

FILED  
98 NOV 23 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RE: L. PACSON COMPANY, LLC

CM

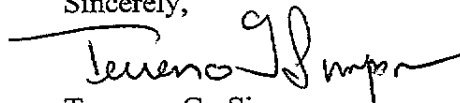
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-11/23/98-01092-002  
\*\*\*285.00 \*\*\*285.00

Dear Sir or Madam:

Enclosed please find for filing the Articles of Organization, Affidavit of Membership and Designation of Registered Agent for L. PACSON COMPANY, LLC as well as a check in the amount of \$285.00 for the corresponding filing fees.

I am also enclosing a copy for you to file, mark and return to me in the enclosed envelope.

Sincerely,

  
Terrence G. Simpson

TGS:wlm  
Enclosures

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

L. PACSON COMPANY, LLC

## ARTICLE II - Address:

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

6010 Lauderdale Street  
Palm Beach Gardens, FL 33418

## ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

December 31, 2030

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## ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

- ☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Peter A. Conn  
6010 Lauderdale Street  
Palm Beach Gardens, FL 33418

- ☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

## ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

N/A

## ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Heirs of member may continue business

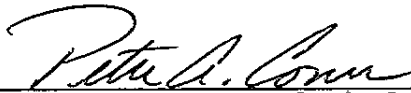
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TALLAHASSEE, FLORIDA

## ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of L. PACSON COMPANY, LLC

certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 100.00 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0 ;  
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 100.00 .



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Peter A. Conn

Typed or printed name of signee

**Filing Fee: \$250.00 for Articles and Affidavit**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: L. PACSON COMPANY, LLC

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

Peter A. Conn

NAME

6010 Lauderdale Street

Florida street address (P. O. Box NOT ACCEPTABLE)

Palm Beach Gardens, FL 33418

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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.*

Peter A. Conn

SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**