## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850

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From:

Account Name : INCORPORATETIME.COM, INC.

Account Number: I19990000221
Phone: (631)224-9004

Fax Number : (631)224-7979

LIMITED LIABILITY COMPANY

Performance Outcomes LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I: NAME:

The name of the Limited Liability Company is:

Performance Outcomes LLC

ARTICLE II: ADDRESS:

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

1110 Hickory Way, Weston, FL 33327

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

Michelle Rhein 1110 Hickory Way, Weston, FL 33327

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 Iam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.,

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ARTICLE IV: MANAGEMENT (Check if applicable).

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

ARTICLE V: The initial member(s) of the Limited Liability Company is/are as follows:

Richard Rhein 1110 Hickory Way, Weston, FL 33327 Michelle Rhein 1110 Hickory Way, Weston, FL 33327

Richard Rhein, Member

Michelle Rhein, Member

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

Richard Rhein, Member Michelle Rhein, Member