Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072480003255 Phone : (305)634-3694

Fax Number : (305)633-9696

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LIMITED LIABILITY COMPANY

PREMIER UNIVERSAL INVESTMENTS, LLC

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Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Premier Universal Investments, LLC

Article !! - Address:

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

5434 W. Sample Road #508 Margate, FL 33073

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

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

Name
2620 NW 22nd St.

Florida street address (P.C. Box NOT acceptable)

Fort Lauderdale, FL 33311

City, State, and Zip

Ifaving 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 608, F.S..

Registered Agent's Signature

ARTICLE IV - Management / Members

The name(s) and address(es):

Terris Harris - 5030 Champion Blvd. #443, Boca Raton, FL 33496

Doyle Aaron - 5030 Champion Blvd. #443, Boca Raton, FL 33496

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ARTICLE V - Management (Check box if applicable.)

ARTICLE V - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

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

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

Typed of printed name of signee