

L04 0000 26209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

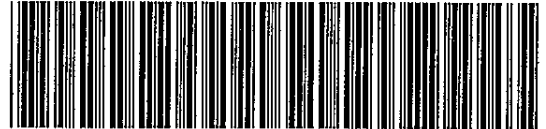
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

4/1/04
[Signature]

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PREFERRED TRADING, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

I. MICHAEL TUCKER
(Name of Person)

LAW OFFICE OF I. MICHAEL TUCKER, ESQUIRE
(Firm/Company)

SUNTRUST BANK BUILDING, 498 PALM SPRINGS DRIVE, SUITE 100
(Address)

ALTAMONTE SPRINGS, FLORIDA 32701
(City/State and Zip Code)

For further information concerning this matter, please call:

I. MICHAEL TUCKER at (407) 977-8836
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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04 MAR 31 AM 11:40
TALLAHASSEE, FLORIDA
REGISTRATION SECTION

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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04 MAR 31 AM 11:40
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

PREFERRED TRADING, LLC

ARTICLE II - Address:

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

Principal Office Address:

670 NORTH ORLANDO AVENUE

SUITE 103A

MAITLAND, FL 32751

Mailing Address:

670 NORTH ORLANDO AVENUE

SUITE 103A

MAITLAND, FL 32751

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

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

I. MICHAEL TUCKER, ESQUIRE

Name

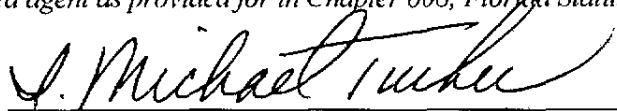
SunTrust Bank Bldg. 498 Palm Springs Drive, Suite 100

Florida street address (P.O. Box **NOT** acceptable)

ALTAMONTE SPRINGS FLORIDA 32701

City, State, and 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 608, Florida Statutes..



Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

STEVEN F. MEEKER

2020 STRATHAVEN ROAD

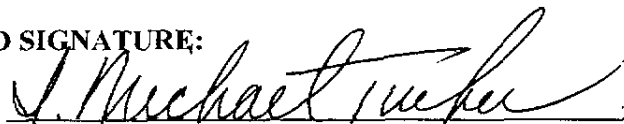
WINTER PARK, FL 32792

(Use attachment if necessary)

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TALLAHASSEE, FLORIDA

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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 penalties of perjury that the facts stated herein are true.)

I. MICHAEL TUCKER

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)