

W4000036027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900035399979

05/05/04--01013--019 **155.00

RECEIVED
MAY 10 2004
13.11

W4-36027
gh

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PREMIER Consultants L.L.C.
(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:

GRACE A. HADLEY

PREMIER Consultants, L.L.C.
(Firm/Company)

751 Pine Drive, Suite-202
(Address)

Pompano Beach, FL 33060
(City/State and Zip Code)

For further information concerning this matter, please call:

Grace Hadley at (954) 815-0324
(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

FILED
TALLAHASSEE, FLORIDA

FILED

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

PREMIER Consultants, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

751 Pine Drive
Suite - 202
Pompano Beach FL 33060

Mailing Address:

751 Pine Drive
Suite - 202
Pompano Beach FL 33060

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

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

GRACE A. Hadley
Name
751 Pine Drive, Ste. 202
Florida street address (P.O. Box **NOT** acceptable)
Pompano Beach, FL 33060
City, State, and Zip

RECEIVED
TALLAHASSEE, FLORIDA

10/21/11 11:00

FILED

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..

Grace A. Hadley
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:

"MGR."

Grace A. Hadley
751 Pine Drive #302
Pompano Beach FL 33060

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Grace A. Hadley
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.)

GRACE A. HADLEY
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)

STATE OF FLORIDA
TALLAHASSEE

01/11/11 PM 1:02

FILED