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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: PREMIER ONE HOLDINGS LLC (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are su	ubmitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
TIMOTHY K HARTMAN	Name of Person)	
(I	Firm/Company)	
P.O. BOX 1672		
	(Address)	
OLDSMAR FL 34677		<u> </u>
(City/	State and Zip Code)	
For further information concerning this matter, please of	call:	OS TĂĬ
	at (813) 818-8418	dephone Number)
(Name of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount:		# P
\$125.00 Filing Fee \$\times \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection prporations

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
PREMIER ONE HOLDINGS LLC			
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is		
Principal Office Address:	Mailing Address:		
1426 GLENVIEW RD	P.O. BOX 1672		
PALM HARBOR FL 34683	OLDSMAR FL 34677		
TIMOTHY K HARTMAI	Name		
1426 GLENVIEW RD.			
Florida s	street address (P.O. Box NOT acceptable)		
PALM HARBOR FL 3	4683 FL		
City	, State, and Zip		
liability company at the place designate registered agent and agree to act in this contact statutes relating to the proper and comp	and to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S		

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	TIMOTHY K HARTMAN
	1426 GLENVIEW RD
	PALM HARBOR FL 34683
MGR	SUSAN A HARTMAN
	1426 GLENVIEW RD
	PALM HARBOR FL 34683
MGRM	DAVID L MARIES
	16304 COLWOOD DR
	ODESSA FL 33556
MGR	BRENDA L MARIES
	16304 COLWOOD DR
	ODESSA FL 33556
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	Wanner State
Signature of a member or	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herei	1 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury are true.)
TIMOTHY K HARTMAN	I
Typed	or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)