

L08000016212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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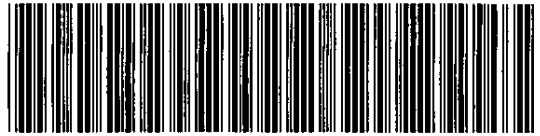
Thomas Shaver ~~one~~

AUTHORIZATION BY PHONE TO

CORRECT eff date to be 02/18/08

DATE 02/14/08 @ 12:48pm

EXAM



800117811378

02/13/08--01025--028 **160.00

Effective Date 02/18/08

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 13 PM 1:18

J. BRYAN

FEB 13 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ProUnited

(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:

Robin Suhlman

(Name of Person)

ProUnited, L.L.C.

(Firm/Company)

28932 Bay Tree Place

(Address)

Wesley Chapel, FL 33545

(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Shaver

(Name of Person)

at (813) 579-3400

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ProUnited, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

28932 Bay Tree Place

Wesley Chapel, FL 33545

USA

Mailing Address:

Christopher J. Salgado

2029 Bainbridge St., #1

Philadelphia, PA 19146

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Christopher J. Salgado

Name

Effective Date 02/18/08

28932 Bay Tree Place

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

Wesley Chapel, FL 33545

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, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

Christopher J. Salgado
2029 Bainbridge St., #1
Philadelphia, PA 19146

MGRM

Thomas Shaver
5124 Manor Ridge Court
Westerville, OH 43082

MGRM

Samir Mardini
15 1st Street SE #2103
Rochester, MN 55904

MGRM


Peter Mercado
72 Sheldon Road
Tarrytown, NY 10591

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 02/18/08 January 7, 2008 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Christopher J. Salgado

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)