# 08000049505

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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05/16/08--01016--019 \*\*130.00

Effective Date 06/01/08

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SECRETARY OF STATE
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T. HAMPTON

MAY 1 9 2008

EXAMINER

## **COVER LETTER**

		COVE	KLETIEK	ڀ
TO:	Registration Division of C		<u> </u>	ř
SUBJI	ECT: Premi	ier Choice LLC		
		(Name of Limit	ed Liability Company)	
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
	William J.	DeNight		
			(Name of Person)	
	Bentley G	Group Enterprises,	Inc.	
			(Firm/Company)	<del>`</del>
	6500 1st	Ave N		
			(Address)	
	St Peters	burg, FLorida 3371	10	
	•	(Cit	y/State and Zip Code)	
For fur	ther information	concerning this matter, please	e call:	
Willi	am J. Del	Night	_at (	)
	(Nam	e of Person)	(Area Code & Daytime Tele	phone Number)
Enclos	sed is a check f	for the following amount:		
<b>\$</b> 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 C	ircle

# Effective Date 06/01/08

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Premier Choice LLC		
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pri	ncipal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
The par Office Address.	Maning Audiess.	
500 1st Ave N	6500 1st Ave N	
St Petersburg, FLorida 33710	St Petersburg, FLorida 33710	
		<del></del>
ARTICLE III - Registered Agent, Registered	Office. & Registered Agent	's Signature:
The Limited Liability Company cannot serve as its own Registe		
business entity with an active Florida registration.)		
The name and the Florida street address of the re	gistered agent are:	
がら Bentley Group Enterp	orises, Inc.	•
Name		
GEOD 1 at Ava N		
6500 1st Ave N	ress (P.O. Box NOT acceptable)	
	· ·	
St Petersburg, FLorio	<del></del>	
City, State, and	ıq Zip	
Having been named as registered agent and to a		
liability company at the place designated in the		
registered agent and agree to act in this capacity statutes relating to the proper and complete per		-
accept the obligations of my position as register		•
	1	,
/Wala // //a	utter Me	_
Registered Agent's Signatu	re (REOURED)	.¥1¥1 88. 38.
registered Agent's dignate	ic (REDDIKED)	CRI E T
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	IED)	
(CONTINU	J <b>ED)</b>	

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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:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er
MGR	William J. DeNight
	10633 Hatteras Dr
	Tampa, FL 33615
(Use attachment if necessary)	
TCLE V: Effective date, if other to reffective date is listed, the date 90 days after the date of filing.)	than the date of filing: 06/01/2008 . (OPTIONAL) must be specific and cannot be more than five business days p
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.)

William J DeNight

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)

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SECRETARY OF STATE