L09000069459

(Re	questor's Name)	
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Certified Copies	Certificates	s of Status <u> </u>
Special Instructions to I	Filing Officer:	

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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL 2 0 2009

EXAMINER

COVER LETTER

TO:	Registration Division of C					
SUBJE	CT:	PREI	P CLC	NHTC	NG, LLC.	
		Name of Limi	ted Liab	ility Cor	npany	
The en	closed Articles	of Organization and fee(s) are	submitt	ed for fil	ling.	
Please	return all corres	pondence concerning this ma	tter to the	e follow:	ing:	
	· · · · · · · · · · · · · · · · · · ·	MA	TTHEV		GHT	
			Name o	f Person		
			Firm/C	ompany		
		7069 KEY H	IAVEN	ROA	D UNIT 50	3
			Add	iress		
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			ty/State a	•		
-		E-mail address: (to be used	for future	annual r	eport notification	n)
For furt	her information	concerning this matter, pleas	e call:			
	·····	1EW KNIGHT	_ at ()	
	Name	of Person		Area Co	ode & Daytime	Telephone Number
Enclos	ed is a check f	or the following amount:				
] \$125.(00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce Ce	rtified (ling Fee & Copy opy 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		Registr Division Clifton 2661 E	Courier Addination Section of Corporate Building Executive Centers 523	ions er Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 JUL 17 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

July 9, 2009

MATTHEW KNIGHT 7069 KEY HAVEN RD UNIT 503 SEMINOLE, FL 33777

SUBJECT: PREP, LLC

Ref. Number: W09000031577

We have received your document for PREP, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L02000005822 (THE PREP, LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Division of Corporations - P.O. ROX 6397 - Tallahasson, Florida 39314

Letter Number: 609A00023491

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the I	me: Limited Liability Company	is:
**************************************	PREP CLOTI	
(N	fust end with the words "Limited Lis	ability Company," "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addre		principal office of the Limited Liability Company is
Principal Office	Address:	Mailing Address:
7060 KEV HAVI	EN ROAD UNIT 503	7000 KEV HAVEN BOAD UNIT 500
SEMINOLE, FL		7069 KEY HAVEN ROAD UNIT 503 SEMINOLE, FL 33777
ARTICLE III - I (The Limited Liability (33777 Registered Agent, Register	
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Register	sed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Register Company cannot serve as its own Re active Florida registration.) Florida street address of the	sed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Register Company cannot serve as its own Re active Florida registration.) Florida street address of the	SEMINOLE, FL 33777 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: W KNIGHT
ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Register Company cannot serve as its own Re active Florida registration.) Florida street address of th MATTHE	SEMINOLE, FL 33777 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: W KNIGHT
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ARTICLE III - I (The Limited Liability of business entity with an	Registered Agent, Register Company cannot serve as its own Re active Florida registration.) Florida street address of th MATTHE Nar 7069 KEY HAVE	SEMINOLE, FI 33777 red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another registered agent are: W KNIGHT ne N ROAD UNIT 503 O. Box NOT acceptable)

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 (REQVIRED)

(CONTINUED)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Page 1 of 2

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	MATTHEW KNIGHT
	7069 KEY HAVEN ROAD UNIT 503
	SEMINOLE, FL 33777
MGR	DAVID MEDEARIS
	110 FAIRGROUND AVENUE
	DAYTON, OH 45409
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Effective date, if other than the	he date of filing: (OPTIONAL)
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CLE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with a of this document contract that the facts stated in	be specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be specific and cannot be more than five business days printed by the specific and cannot be more than five business days printed by the specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be specific and cannot be specific and cannot be specific and cannot be specific and cannot be specifically and c

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)