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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUN 1 5 2010

EXAMINER

COVER LETTER

•	on Section f Corporations	
SUBJECT:	Pri	or Planning, LLC
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ted Liability Company
The enclosed Articl	es of Organization and fee(s) are	submitted for filing.
Please return all cor	respondence concerning this mat	tter to the following:
	Ma	ary Rose Knelly Name of Person
		Name of Person
		Firm/Company
·····	28	Red Hill Road
		Address
<u></u>		ilton, PA 17847 ty/State and Zip Code
	mrtk	nelly@verizon.net
For further information	E-mail address: (to be used tion concerning this matter, pleas	for future annual report notification) e call:
	ry Rose Knelly	at (570
		Area Code & Daynine Telephone Number
	ck for the following amount: ee \$\ins\$\\$130.00 \text{ Filing Fee & Certificate of Status}\$	S155.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Prior Plan	ning, LLC	
(Mı	ust end with the words "Limited L	iability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Ad	ldress:		
The mailing addres	ss and street address of th	e principal office of the Limited Li	ability Company i
Principal Office Address:		Mailing Address:	
2900 Glades Circle, Suite 1000		28 Red Hill Road	
Weston, FL 33327		<u> </u>	
ARTICLE III - R (The Limited Liability Co	egistered Agent, Register company cannot serve as its own R	Milton, PA 17847 ered Office, & Registered Agent's tegistered Agent. You must designate an indiv	s Signature: idual or another
ARTICLE III - R The Limited Liability Co	egistered Agent, Registe	Milton, PA 17847 ered Office, & Registered Agent's degistered Agent. You must designate an indiv	s Signature: idual or another
ARTICLE III - R The Limited Liability Co	egistered Agent, Register ompany cannot serve as its own Rective Florida registration.) Florida street address of the serve address of the serve agent address of the serve addr	Milton, PA 17847 ered Office, & Registered Agent's degistered Agent. You must designate an indiv	s Signature: idual or another
ARTICLE III - R The Limited Liability Co	egistered Agent, Registered Agent, Registered Agent, Registered ompany cannot serve as its own Reactive Florida registration.) Florida street address of to TouchPoint Man	Milton, PA 17847 ered Office, & Registered Agent's degistered Agent. You must designate an individue registered agent are:	Signature: idual or another
ARTICLE III - R The Limited Liability Co	egistered Agent, Registered Agent, Registered Agent, Registered ompany cannot serve as its own Reactive Florida registration.) Florida street address of tagging TouchPoint Mai	Milton, PA 17847 ered Office, & Registered Agent's tegistered Agent. You must designate an individue registered agent are: rketing Group, LLC	S Signature: idual or another
ARTICLE III - R (The Limited Liability County with an a	egistered Agent, Register ompany cannot serve as its own Rective Florida registration.) Florida street address of to TouchPoint Mai	Milton, PA 17847 red Office, & Registered Agent's degistered Agent. You must designate an individue registered agent are: rketing Group, LLC ame	Signature: idual or another 10 JUN 14 AN 9:
ARTICLE III - R (The Limited Liability County with an a	egistered Agent, Registered Agent, Registered Agent, Registered English and Serve as its own Rescrive Florida registration.) Florida street address of to TouchPoint Main No. 2900 Glades (Florida street address) (Weston, FL 33327)	Milton, PA 17847 ered Office, & Registered Agent's Registered Agent. You must designate an individue he registered agent are: rketing Group, LLC arme Circle, Suite 1000 P.O. Box NOT acceptable)	Signature: idual or another 10 JUN 14 AM 9: 80

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)

Page 1 of 2 (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	Name and Address:
"MGRM" = Managing Member	
Manager	Mary Rose Knelly
	28 Red Hill Road
	Milton, PA 17847
,	
· •	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than t	he date of filing: (OPTIONAL)
If an effective date is listed, the date must o or 90 days after the date of filing.)	t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
YAA O	w-Rose Knelly
Signature of a men	ber or an authorized representative of a member.
(In accordance with of this document of that the facts stated	section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury herein are true.)
Mar	Typed or printed name of signee
Filing Fees:	A J ped of printed name of alginor

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

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

SEGRETARY OF STATE DIVISION OF CORPORATIONS