

**L11000139213**

Florida Department of State  
Division of Corporations  
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**L. SELLERS**

DEC 12 2011

To:

Division of Corporations  
Fax Number : (850) 617-6383

**EXAMINER**

From:

Account Name : GREENSPOON MARDER, P.A.  
Account Number : 076064003722  
Phone : (888) 491-1120  
Fax Number : (954) 343-6962

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: rodsheldon@preferreddevelopers.net

**FLORIDA LIMITED LIABILITY CO.  
PREFERRED-MO, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED  
11 DEC -9 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
11 DEC -9 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# Fax Message

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**To:** FLORIDA SECRETARY OF STATE

**Fax:** 18506176383

**From:** Michelle Narea-Popu  
Greenspoon Marder, P.A.

**Date:** 12/9/2011 3:05 PM

**Pages:** 1 of 5 (including this page)

**Subject:** preferred-mo, llc

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**ARTICLES OF ORGANIZATION  
OF  
PREFERRED-MO, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is PREFERRED-MO, LLC.

**ARTICLE II - Duration:**

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

**ARTICLE III - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is 2255 Glades Road, Suite 324-A, Boca Raton, Florida 33431.

**ARTICLE IV - Registered Agent:**

The name and address of the initial registered agent for this Limited Liability Company is Wendy Sheldon, 2255 Glades Road, Suite 324-A, Boca Raton, Florida 33431.

**ARTICLE V - Management:**

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of the initial manager(s) who is/are to serve as manager(s) is/are:

Wendy Sheldon    2255 Glades Road, Suite 324-A, Boca Raton, Florida  
33431.

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Whereof, the undersigned authorized representative of the member has executed these articles this 9 day of December 2011.

  
WENDY SHELDON  
Authorized Representative of Member

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

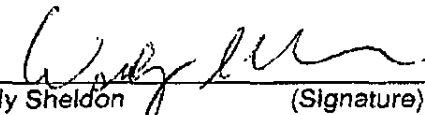
1. The name of the Limited Liability Company is:

**PREFERRED-MO, LLC**

2. The name and address of the registered agent and office is:

Wendy Sheldon  
2255 Glades Road, Suite 324-A  
Boca Raton, Florida 33431

*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.*

  
Wendy Sheldon (Signature) December 9, 2011 (Date)