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JAN 1 0 2013 T. **HAMPTON**

COVER LETTER

TO: **Registration Section Division of Corporations** PREMIER REFERRAL NETWORK, LLC 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: JERI THOM Name of Person PREMIER REFERRAL NETWORK, LLC Firm/Company PO BOX 7868 Address LAKELAND, FL 33807 City/State and Zip Code JERILTHOM@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JERI THOM Name of Person Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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

Effective Date 11511

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

PREMIER REFERRAL NETWORK, LLC	
(Must end with the words	s "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3320 BRIDGEFIELD DRIVE	PO BOX 7868
LAKELAND, FL 33803	LAKELAND, FL 33807
nother business entity with an active Florida to The name and the Florida street address of the JERI L. THOM	
	Name
3320 BRIDGEFIELD DRIVE	(P.O. Box NOT acceptable)
LAKELAND	FL 33803
City	Zip
the place designated in this certificate, I her capacity. I further agree to comply with the p of my duties, and I am familiar with and acco	accept service of process for the above stated limited liability company a reby accept the appointment as registered agent and agree to act in this provisions of all statutes relating to the proper and complete performance the obligations of my position as registered agent as provided for in Chapter 603. U.S Int's Signature (REQUIRED)

Page 1 of 2

2014 JAN -6 PM 1:57

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The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager	
"MGR" = Manager	
WICH - Manager	
MGR	JERI L. THOM
	3320 BRIDGEFIELD DRIVE
	LAKELAND, FL 33803
AMBR	WILLIAM M. THOM
	3320 BRIDGEFIELD DRIVE
	LAKELAND, FL 33803
AMBR	MICHAEL R. THOM
	3164 OAKPARK DRIVE
	LAKELAND, FL 33803
(Use attachment if necessary)	
ffective date is listed, the date must be specife of filing.)	fic and cannot be more than five business days prior to or 90
ffective date is listed, the date must be specife of filing.)	
ffective date is listed, the date must be specific of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb	fic and cannot be more than five business days prior to or 90
REQUIRED SIGNATURE: Signature of a memb (In accordance with section 605 constitutes an affirmation unde	fic and cannot be more than five business days prior to or 90
ffective date is listed, the date must be specific of filing.) ELE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a memb (In accordance with section 605 constitutes an affirmation under I am awary that any false information of the constitutes and affirmation under I am awary that any false information.	per or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.
REQUIRED SIGNATURE: Signature of a memb (In accordance with section 605 constitutes an affirmation unde I am aware that any false infort constitutes a third degree felon JERI L. THOM	per or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.

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)

Page 2 of 2

2014 JAN -6 PM 1: 57