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JAN 3 0 2013 **T. HAMPTON**

COVER LETTER

TO: **Registration Section**

Division of Corporations

PREMIER RENTAL 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 REN	TAL NE	TWORK,	LLC
		Firm/Co	npany	
	PO BOX 7868			
		Addre	ess	
	LAKELAND, FL	33807		
-	JERILTHOM@AOL.CO		•	
For further	information concerning this matter,		r future annual repor	t notification)
JERI	THOM	863	646-668	8
	Name of Person	Area Code	Daytime Teleph	one Number
Enclosed is \$125.00 Fil	a check for the following amount: ing Fee \$130.00 Filing Fee & Certificate of Status	Certifi	0 Filing Fee & ed Copy I 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

Effective Date 21114

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	/ is :	
PREMIER RENTAL NETWORK, LLC		
(Must end with the wo	ords "Limited Liability Company, "L.L.C.	.," or "LLC.")
ARTICLE II ~ Address:		
The mailing address and street address of th	e 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	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot servanother business entity with an active Florida	ve as its own Registered Agent. You mus	
The name and the Florida street address of t	he registered agent are:	
JERI THOM		
	Name	
3320 BRIDGEFIELD DRIV	/E	
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)	
LAKELANU	FL 33803	
Ci		
capacity. I further agree to comply with the of my duties, and I am familiar with and a comply with the office of my duties, and I am familiar with and a complex to the co	hereby accept the appointment as register, as provisions of all statutes relating to the paccept the obligations of my position as reaccept the obligations of my position as reaccept the obligation of my position as reaccept the obligations of t	ed agent and agree to act in this proper and complete performance gistered agent as provided for in
	(CONTINUED)	SEC SEC
	Page I of 2	FILE 2014 JAN 27 P SECRETARY OF TALLAHASSEE.

<u>Fitle:</u> AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
MGR	JERI THOM
	3320 BRIDGEFIELD DRIVE
	LAKELAND, FL 33803
AMBR	WILLIAM THOM
	3320 BRIDGEFIELD DRIVE
	LAKELAND, FL 33803
MBR	MICHAEL THOM
	3164 OAKPARK DRIVE
	LAKELAND, FL 33803
V: Effective date, if other than the date	of filing: 02/01/2014 (OPTIONAL)
EV: Effective date, if other than the date ective date is listed, the date must be sport filing.)	of filing: 02/01/2014 (OPTIONAL) ecific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date ctive date is listed, the date must be sport filing.)	
E V: Effective date, if other than the date ctive date is listed, the date must be spot filling.) E VI: Other provisions, if any.	
retive date is listed, the date must be specifiling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section of constitutes an affirmation under the section of the secti	mber or an authorized representative of a member.
CV: Effective date, if other than the date etive date is listed, the date must be spot filing.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section of constitutes an affirmation under a manual contraction of the constitutes and affirmation under a manual constitutes and affirmation under a manual constitutes and affirmation under the constitutes and affirmation	mber or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State

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

ARTICLE IV-

Page 2 of 2

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)

HILLD 014 Jan 27 Phile: 19 secretary of state