## #L/4000045689

(Red	juestor's Name)	
(Add	lress)	<del></del>
(Add	Iress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	
ļ		

Office Use Only



700257779087

03/14/14--01012--014 \*\*125.00

FILED
2014 MAR 14 PM 5: 04
SECRETARY OF STATE

K.SALY EXAMINER MAR 192014

## **COVER LETTER**

TO: Registration S  Division of Co			
SUBJECT: Florida F	Premier Consulting LLC Name of Lim	ited Liability Company	
The enclosed Articles of	of Organization and fee(s) are	e submitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
George Fr	rangos	Name of Person	
Florida Pr	emier Consulting	Firm/Company	
		rim/Company	
_1317 Belo	cher Drive		
		Address	
<u>Tarpon Sc</u>	orings, Florida, 34689	ty/State and Zip Code	<u> </u>
nicktabus@gmai	Loom		
<u> mentabases gillar</u>	E-mail address: (to be used	for future annual report notifica	tion)
For further information	concerning this matter, pleas	se call:	
George Frangos Name	at (_7		ephone Number
Enclosed is a check for	the following amount:		
☑ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 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

ARTICLE I - Name: The name of the Limited Liability Company is:	•
Florida Premier Consulting LLC (Must end with the words "Limited ARTICLE II - Address:	I Liability Company, "L.L.C.," or "LLC.")  ffice of the Limited Liability Company is:  Mailing Address:  1317 Belcher Drive Tarpon Springs. Florida
The mailing address and street address of the principal o	ffice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1317 Beicher Drive Tarpon Springs, Florida 34689	1317 Belcher Drive Tarpon Springs, Florida 34689
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered	agent are:
George Frangos	
Name	
1317 Belcher Drive Florida street address (P.O. Box	x NOT acceptable)
Tarpon Springs	FL 34689
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob-	rvice of process for the above stated limited liability company at a state of the appointment as registered agent and agree to act in this of all statutes relating to the proper and complete performance digations of my position as registered agent as provided for in ter 605, F.S
(CONTINU	(ED)

Page 1 of 2

<u> </u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	Allahadaa Talassa
AMBR	Nicholas Tabus
	1427 Meres Boulevard
	Tarpon Springs FL-34689
AMBR	George Frangos
	1317 Belcher Drive
	Tarpon Springs FL-34689
	Market and the second of the s
ctive date is listed, the date mus	the date of filing: (OPTIONAL) at be specific and cannot be more than five business days prior to or
CV: Effective date, if other than ctive date is listed, the date must filling.)	the date of filing: (OPTIONAL)  It be specific and cannot be more than five business days prior to or
CV: Effective date, if other than ctive date is listed, the date must filling.)	the date of filing: (OPTIONAL)  It be specific and cannot be more than five business days prior to or
CV: Effective date, if other than ctive date is listed, the date must filling.)	the date of filing: (OPTIONAL)  It be specific and cannot be more than five business days prior to or
CV: Effective date, if other than crive date is listed, the date must filing.) CVI: Other provisions, if any.	the date of filing: (OPTIONAL) at be specific and cannot be more than five business days prior to or
CV: Effective date, if other than crive date is listed, the date must filing.) CVI: Other provisions, if any.	the date of filing: (OPTIONAL) at be specific and cannot be more than five business days prior to or
CV: Effective date, if other than crive date is listed, the date must filing.) CVI: Other provisions, if any.	the date of filing: (OPTIONAL) at be specific and cannot be more than five business days prior to or
CV: Effective date, if other than ctive date is listed, the date must filling.) CVI: Other provisions, if any.  REQUIRED SIGNATURE:	at be specific and cannot be more than five business days prior to or
C.V: Effective date, if other than crive date is listed, the date must filling.) C.VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature	of a member or an authorized representative of a member.
C.V: Effective date, if other than crive date is listed, the date must filling.) C.VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmatic	of a member or an authorized representative of a member.  Etjon 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.
CV: Effective date, if other than ctive date is listed, the date must filing.)  CVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmation of the constitutes are affirmatio	of a member or an authorized representative of a member.  Stigns 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, see information submitted in a document to the Department of State
V: Effective date, if other than citive date is listed, the date must filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmation of the constitutes are affirmation	of a member or an authorized representative of a member.  Etjon 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.
W: Effective date, if other than citive date is listed, the date must filing.)  WI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmation of the constitutes at third degree of the constitutes at the	of a member or an authorized representative of a member.  etion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State se felony as provided for in s.817.155, F.S.)
V: Effective date, if other than citive date is listed, the date must filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmation of the constitutes are affirmation	of a member or an authorized representative of a member.  etion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State se felony as provided for in s.817.155, F.S.)
V: Effective date, if other than tive date is listed, the date must filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature  (In accordance with seconstitutes an affirmation of the constitutes at third degree of the constitutes at the c	of a member or an authorized representative of a member.  Edion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. See information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S.)

Page 2 of 2