L14000091083

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

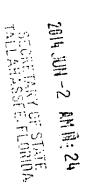
Office Use Only



800260727538

06/02/14--01041--015 **160.00

JUN - 6 2014 T CLINE



COVER LETTER

\$50

TO: Registration of Division of	on Section f Corporations				
SUBJECT:	Prime N Name of	lational Investments, LLC	. <i>:</i>		
The enclosed Article	es of Organization and fee(s	s) are submitted for filing.			
Please return all cor	respondence concerning thi	s matter to the following:			
		Sean Ford			
		Name of Person			
	Prin	ne National Investments, LLC.			
		Firm/Company			
- Ing.		P.O. BOX 669183			
		Address	2 22 1 22 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2011	
	Po	mpano Beach, FL 33066-9183	74,443 23-121 111-121	2014 JUN	.4= ++ 1 {
		City/State and Zip Code	· ·	1-2	200 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
er <u>e vez</u>	E-mail address: (to be	©primenationalinvestments.com used for future annual report notific	ation)	75°	
For further informat	ion concerning this matter,	please call:	_0200 F	國 : 24	B was
	Sean Ford a ame of Person	t (5852 Lephone Number		
Enclosed is a check	for the following amount:				
1 \$125.00 Filing Fee	Certificate of Status		☑\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	i)	
	ailing Address egistration Section	Street/Courier Add Registration Section			

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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	s:		
Prime N	National Investmen	its, LLC,	
(Must end with the word	s "Limited Liability	Company, "L.L.C.,"	or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	principal office of th	e Limited Liability C	Company is:
Principal Office Address:	<u>Maili</u>	ng Address:	
21301 Powerline Rd # 106 Boca Raton, FL		PO BOX 6691 Pompano Beat	
33433		33066-918	3
another business entity with an active Florida The name and the Florida street address of the	-	:	
2130	Powerline Rd # 1	06	
Florida street address			
Boca R		33433	
City		Zip	
Having been named as registered agent and to the place designated in this certificate, I he capacity. I further agree to comply with the p of my duties, and I am familiar with and according to the complex of the capacity. Registered Agents	reby accept the appo provisions of all stati	intment as registered utes relating to the pro of my position as regis S	agent and agree to act in this oper and complete performance
(0	CONTINUED)		2014 SEC

Page 1 of 2

2014 JUN -2 AM (1): 24

Title:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
AMBR	Sean Ford
	21301 Powerline Road #106
	Boca Raton, FL 33433
AMBR	Shareka Ford
	21301 Powerline Road #106
	Boça Raton, FL 33433
<u> </u>	
V: Effective date, if other than the date of ctive date is listed, the date must be specific	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 9
Use attachment if necessary) E.V: Effective date, if other than the date of ctive date is listed, the date must be specif filing.) E.VI: Other provisions, if any.	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 9
CV: Effective date, if other than the date of ctive date is listed, the date must be specif filing.) CVI: Other provisions, if any. REQUIRED SIGNATURE:	fic and cannot be more than five business days prior to or 9
CV: Effective date, if other than the date of ctive date is listed, the date must be special filing.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0 constitutes an affirmation under the constitutes are affirmation under the constitutes are section 605.0 constitutes are affirmation under the constitutes are affir	Fic and cannot be more than five business days prior to or 9 Port or an authorized representative of a member. 1203 (1) (b), Florida Statutes, the execution of this document ne penalties of perjury that the facts stated herein are true. tion submitted in a document to the Department of State
CV: Effective date, if other than the date of ctive date is listed, the date must be special filing.) CVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0 constitutes an affirmation under the lam aware that any false informatic constitutes a third degree felony a	Fic and cannot be more than five business days prior to or 9 Port or an authorized representative of a member. 1203 (1) (b), Florida Statutes, the execution of this document ne penalties of perjury that the facts stated herein are true. tion submitted in a document to the Department of State
CV: Effective date, if other than the date of crive date is listed, the date must be special filing.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb (In accordance with section 605.0 constitutes an affirmation under the lam aware that any false informatic constitutes a third degree felony a	fic and cannot be more than five business days prior to or 9 Por or an authorized representative of a member. 1203 (1) (b), Florida Statutes, the execution of this document he penalties of perjury that the facts stated herein are true. 13 to submitted in a document to the Department of State is provided for in s.817.155, F.S.) Sean Ford

Page 2 of 2

IIII, JUH - 2 MM A : 24