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SECRETARY OF STATE
FALLAHASSEE, FEORIDA

AUG 26 2014

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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: PYLINIEY BUSINESS SEVICES LC 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:
Gennifer Norris
Name of Person
Firm/Company
2155 Wherton Rd Ste 121
Clear Water Fl 33212 City/State and Zip Code
una alatme. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Name of Person  Area Code  Daytime Telephone Number
E CO
S125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & \Bigcup \\$155.00 Filing Fee & \Bigcup \\$160.00 Filing Fee, \\ Certificate of Status Certified Copy Certificate of Status & \text{Certified Copy (additional copy is enclosed)}}  Certified Copy (additional copy is enclosed)
(additional copy is circlosed)

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 1 - Name:** 

The name of the Limited Liability Company is:	
Premier Business Se	exicolic
(Must end with the words "Limited L	.iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
200 2nd Am South St. Petersburg F1 33701	200 2nd Ave South St. Petersburg Ti 3321
ARTICLE III - Registered Agent, Registered Office, &	Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own R	
another business entity with an active Florida registration.	) S S S
The name and the Florida street address of the registered a	igent are:
Larayus C	Leurof 3
200 2nd Are Sout	M Unil 471
Florida street address (P.O. Box 1	VOT acceptable)
St Petersbur	(FL 3310)
City	) Zip

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 as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature

Page 1 of 2

Title: - "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	Lazarus George	ud.
	St. Retersburg 21 33701	<u>-</u>
		<del>-</del>
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<del></del>		- -
(Use attachment if necessary)		-
E V: Effective date, if other than the date of	filing: 81914 (OPTIONAL)	
ective date is listed, the date must be speci-	fic and cannot be more than five business days prior to or	90 days
of filing.)	• •	•
E VI: Other provisions, if any.		
E VI: Other provisions, if any.	· · · · · · · · · · · · · · · · · · ·	
E VI: Other provisions, if any.		
REQUIRED SIGNATURE:	- An	-
REQUIRED SIGNATURE: Signature of a memb	ber or an authorized representative of a member.	-
Signature of a member of a member of a constitutes an affirmation under the	ber or an authorized representative of a member. 0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.	- ,
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