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SECRETARY DESTATE
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Office Use Only

MAY 14 2015 U. BRUCE

COVER LETTER

	gistration Section vision of Corporations	
SUBJECT	Primera Choice Construction LLC Name of Limited Liability Company	
The enclose	d Articles of Organization and fee(s) are submitted for filing.	
Please retur	n all correspondence concerning this matter to the following:	
7	Rolando C. Banuelas Name of Person	
	Name of Person	
*	Primera Choice Construction LLC	
٠	Firm/Company	
3. 7.	6125 Olivedale Dr. Address	
Ť	· · · · · · · · · · · · · · · · · · ·	
	Riverview Foode 33578 City/State and Zip Code rolandandbrenda@/ive-com E-mail address: (to be used for future annual report notification)	
	City/State and Zip Code	
***************************************	F-mail address: (to be used for future annual report notification)	
For further	information concerning this matter, please call:	
		7
Roland	W C. Baruelas at 813 391-2369 Name of Person Area Code Daytime Telephone Number 75 75 75 75 75 75 75 75 75 75 75 75 75	m
	RATE 2	
Enclosed is	a check for the following amount:	
\$125.00 Fil	ing Fee \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$ Certificate of Status \$\Bigcup \\$155.00 \text{ Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\Bigcup \\$130.00 \text{ 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
Tallahassec, FL 32301

ARTICLES'OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Primere Choice Construction LCC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
6175 Olivedale Dr. Po Box 1594 Riverview FC- 33578 Winauma FC- 33598
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Rolando C. Barrelas Name 6125 Olivedale Dr.
Name
6125 Olivedale Dr.
Florida street address (P.O. Box NOT acceptable)
Riverview FL 33578 City Zip
City Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company 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 Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2
Page 1 of 2 Page

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	21 1 0 0 65
AMBR.	Kolando C. Bannelos
W COIC	Riverview FC 33578
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
EV: Effective date, if other than the ctive date is listed, the date must l	date of filing: (OPTIONAL) se specific and cannot be more than five business days prior to or 90 (
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E V: Effective date, if other than the sective date is listed, the date must lef filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with section)	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the ective date is listed, the date must lef filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with section constitutes an affirmation)	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
E VI: Other provisions, if any. E VI: Other provisions, if any. Signature of (In accordance with section constitutes an affirmation I am aware that any false)	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document
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