## L16000/52418

(Re	questor's Name)	
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## COVER LETTER

10.	Division of Corporations			
CUD II	Performance Sales Group, LL	С		
SUDJE	CCT:Nam	e of Limited Liabil	lity Company	
The end	closed Articles of Organization and f	ee(s) are submittec	I for filing.	
Please	return all correspondence concerning	this matter to the	following:	
	Danny Murillo			
		Name of	Person	
	Performance Sales Group, LLC			
		Firm/Co	ompany	
	5732 S Bayberry Lane			
		Addı	ress	
	Tamarac, FL 33319			
	murilloinc@yahoo.com	City/State ar	nd Zip Code	
	E-mail address: (to	be used for future	annual report notificati	on)
For furth	ner information concerning this matte	r, please call:		
	Danny Murillo	954 _at (	775-6624 _)	
	Name of Person		Daytime Telephone	
Enclos	ed is a check for the following amou	nt:		
\$125.0	00 Filing Fee \$130.00 Filing F Certificate of St	atus L—Certif	00 Filing Fee & Tied Copy nal copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, El. 32314		Street Address New Filing Section Division of Corporation Clifton Building 2661 Executive Center	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Performance Sales Group, LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
RTICLE II - Address: ne mailing address and street address of the principal off	ice of the Limited Liability Company is:
	ice of the Limited Liability Company is:  Mailing Address:
ne mailing address and street address of the principal off	, , ,

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:

Danny Murillo		
	Name	
5732 S Bayberry L	ane	
Florida street addre	ess (P.O. Box <b>NOT</b> ac	cceptable)
Tamarac	FL	33319
City	State	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

CRETARY OF STATE

"MGR" = Manager  "MGR" = Manager  (Use attachment if necessary)  E. V: Effective date, if other than the date of filing: Aug 3rd, 2016  E. V: Effective date, if other than the date of filing: Aug 3rd, 2016  (OPTIONAL)  ective date is listed, the date must be specific and cannot be more than five business days prior to or 90 de of filing.)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.  E. VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a member of an authorized representative of a member.  This document is executed in accondance with section 605,0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$17.155, F.S.  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  Filing Fees:	Title:		Name and Address:	
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ARTICLE IV-