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COVER LETTER

	ew Filing Section ivision of Corporations		·
SUBJECT	: Fremier Property	Maintenance Group LLC	<u></u>
The enclos	sed Articles of Organization and fee(s) are	e submitted for filing.	
Please retu	orn all correspondence concerning this ma	atter to the following:	No Mark House . 185
	Cody Townsend	Name of Person	_
		· · · · · · · · · · · · · · · · · · ·	_
	5033 Reginhood &	Kennels RJ 58 Address	_
	Tallahassee, Floris	da 32303 City/State and Zip Code	_ .
	E-mail address: (to be used	d for future annual report notification)	
For further	information concerning this matter, pleas	sc call:	
/	Name of Person	Area Code Daytime Telephone Number	८५ -) अध्यक्षकार्यः ५ २०
	is a check for the following amount: Filing Fee S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee Certificate Copy (additional copy is enclosed) Certificate of Statu Certified Copy (additional copy is en	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallaharsaa, Fi. 323 Lt.	Street Address New Filing 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:

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address: Principal Office Address:

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:

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. Thereby 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)

SHILL GOVE 11 123

"AMBR" = Authorized Member	Name and Address:	vy.	अस्य व्यस्तः अ
"MGR" = ManagerM(2)R	Cody Tansend, 5033 Robin hold Kornes)		
MGB	5095 box wood lane Tallahasser, FL 32303		
AMBR	Brandon Harrell 4990 Boxuson Lane Whatsee, FL 32503		
		,	
(Use attachment if necessary)			
CLE V: Effective date, if other than the dat	e of filing: (OPTIONAL)	A dave after	
As of Gline)	pecific and cannot be more than five business days prior to or 9	o un ra urrer	
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-