M08000002923

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



300130968853

06/12/08--01003--005 **155.00

B. KOHR

JUN 2 0 2008

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446

WALK-IN

ENTITY NAME:

PERFORMANCE SERVICES, LLC

CK# 3356

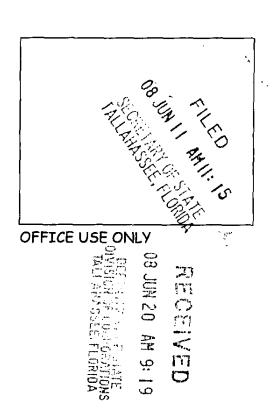
AMOUNT \$155.00

PLEASE FILE THE ATTACHED QUALIFICATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

_ STAMPED COPY

___ CERTIFICATE OF STATUS



Examiner's Initials



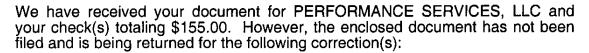
FLORIDA DEPARTMENT OF STATE Division of Corporations

June 12, 2008

FLORIDA RESEARCH & FILING SERVICES 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301

SUBJECT: PERFORMANCE SERVICES, LLC

Ref. Number: W08000028565



Please note that we have RETAINED your \$155.00 payment.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other fillings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent ofthe managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.



Buck Kohr Regulatory Specialist II

Letter Number: 008A00036059

COVER LETTER

	· · ·			
	•			
cov	ER LETTER ALL STORIES			
TO: Registration Section				
Division of Corporations	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
SUBJECT: Performance Services, LLC	A A Victoria Communication			
(Name of Limi	ted Liability Company)			
•• • • •	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited			
Please return all correspondence concerning this m	atter to the following:			
Maggie O. Ferdinand				
(Nar	ne of Person)			
Paranet Corporation Services, Inc NRAI	Affiliate			
(Fire	m/Company)			
3761 Venture Drive, Suite 260				
(Address)				
Duluth, Georgia 30096				
(City/Sta	tte and Zip Code)			
For further information concerning this matter, please call:				
Maggie O. Ferdinand	at (800) 277-9977			
(Name of Person)	(Area Code & Daytime Telephone Number)			
MAILING ADDRESS:	STREET ADDRESS:			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Begin{align*} \\$125.00 \text{ Filing Fee} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Performance Services, LLC	impany; must include "Limited Liability Company," "L.L.C.," or "LLC.")
•	
(If name unavailable, enter alternate name ado	DE SEQUES, UC ppted for the purpose of transacting business in Florida and attach a copy of the written rs adopting the alternate name. The alternate name must include "Limited Liability"
2. Delaware	3. 26-2554748
(Jurisdiction under the law of which foreign company is organized)	limited liability (FEI number, if applicable)
4. 05/05/2008	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	0.
(Date first transac	cted business in Florida, if prior to registration.) 601 & 608.502 F.S. to determine penalty liability) (Street Address of Principal Office) nager-managed company, check here
7. 12500 West Creek Parkway	
Richmond, Virginia 23238	TSS TO
	(Street Address of Principal Office)
8. If limited liability company is a ma	nager-managed company, check here
9. The name and usual business addre	sses of the managing members or managers are as follows:
See Attached List	
10. Attached is an original certificate of existence	e, no more than 90 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organ translation of the certificate under ceth of the tran	nized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
	,
11. Nature of business or purposes to	be conducted or promoted in Florida: Food Service Distribution
	/1/
(In accordance with	nember or an authorized representative of a member. section 608 408(3), F.S., the execution of this document constitutes the penalties of perjusy that the facts stated herein are true.)
$C \rightarrow Z$	Inti, Authorized Person
<u></u>	yped or printed name of signee

LIST OF MANAGERS

Performance Services, LLC

NAME:
George Holm
Martin Brand
Bruce McEvoy
Prakash Melwani

BUSINESS ADDRESS

12500 West Creek Parkway Richmond, VA 23238

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the Limited Liabilit	ry Company is:
Performance S	Services, LLC	
If name unava	ailable, the alternate na	ame to be used in the state of Florida is:
PF6	PERFORMANC	E SERVICES, LLC
2. The name	and the Florida street	address of the registered agent and office are:
	NRAI Services, Inc.	
		(Name)
	2731 Executive Park	c Drive, Suite 4
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Weston	FL 33331
		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 608, Florida Statutes. NRAI Services, Inc.

By: Maggie Ferdinand (Signature)

Maggie Ferdinand, Asst. Secy.

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do bereby certify that we are the Managers and/or Managing
Members of Performance Services, LLC (Name of Limited Lightlity Company)
a limited liability company duly organized and existing under the laws of
State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
PFG Performance Services LLC (Name to be used by limited Hability company in Fforida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 6-18-08
Signature(s) of Manager(s) and/or Managing Member(s):
Joseph T. TRAfigANT
SVP, V/Star Corporation
Managing Member

Delaware

PAGE

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PERFORMANCE SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PERFORMANCE SERVICES, LLC" WAS FORMED ON THE FIFTH DAY OF MAY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4543225 8300

080667625

Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 6639947

DATE: 06-05-08

You may verify this certificate online at corp.delaware.gov/authver.shtml