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Office Use Only



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D SCOTT
JUL 2 2019

Russell Ward Premium Performance Marketing LLC 2410 Hillary Crest Street Apt 107 Wesley Chapel, FL 33544

June 27, 2019

Florida Department of State Division of Corporations

Attn: Dionne M. Scott / Regulatory Specialist II

PO Box 6327

Tallahassee, FL 32314

SUBJECT: Premium Performance Marketing LLC

Ref. Number: W19000057952

Please find enclosed the corrected APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA.

At the time of application, the wrong date was inadvertently entered on Line 4 "Date first transacted business in Florida." Per my conversation with a representative in the Division of Corporations office. I have one lined the incorrect date, corrected the date, and initialed next to the correction. Please find the corrected form enclosed in order to complete processing of my application.

If you require confirmation of the corrected date shown on my application, please contact my CPA, Mike Jesowshek at (844) 327-9272 ext. 712.

Russell Ward

Premium Performance Marketing LLC



June 19, 2019

RUSSELL WARD 2410 HILLARY CREST ST APT 107 WESLEY CHAPEL, FL 33544

SUBJECT: PREMIUM PERFORMANCE MARKETING LLC

Ref. Number: W19000057952

We have received your document for PREMIUM PERFORMANCE MARKETING LLC and your check(s) totaling \$130.00. However, the enclosed document-has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$638.75.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

RECENCED

JUL 01 203

Letter Number: 519A00012355

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name mavaname, enter accorace a	name adopted for the purpose of transacting busines	ss in Florida. The alterna	te name must include "Limited Liability Com	pany," "L.L.C," or "L	.LC.
Pennsylvania		•	-3743412		
(Jurisdiction under the law of which foreign limited hability company is organized)		,	(FEI number, if applicable)		
1tunc 3, 2018 50	INE 3, 2019 RW		_		. 1
	(Date first transacted business in Florida, if (See sections 605 0904 & 605 0905, F.S. to		ife)	, . <del></del> \	
2410 Hillary Crest Stro	ret	24	10 Hillary Crest Street	- >	•
(Street Address of I	Principal Office)	V	(Mailing Address)	.;	_
Apt. 107		Ap	t. 107	ر د ن	_
Wesley Chapel, FL 33.	sley Chapel, FL 33544 Wesle		esley Chapel, FL 33544		_
Name and street address	ss of Florida registered agent: (P.O	. Box <u>NOT</u> acce	eptable)		
Name:	Russell Ward		- <u>-</u>		
Office Address:	2410 Hillary Crest Street Apt. 107		<u> </u>		
	Wesley Chapel		, Florida 33544		
	(City)		(Zin code)		

(Registered agent's signature)

and accept the obligations of my position as registered agent

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: Russell Ward	Manager	Name:
■Member	Address: 2410 Hillary Crest Street	Member	Address:
Authorized	Apt. 107	Authorized .	
Person	Wesley Chapel, FL 33544	Person	
Other	Other	Other	Other
			1
Manager	Name:	Manager	Name: > 1
Member	Address:	Member	Address:
Authorized	<del></del>	☐ Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	☐ Manager	Name:
Member	Address:	Member	Address:
Authorized	<del> </del>	☐ Authorized	
Person		Person	
Other	Other	Other	Other

<u>Important Notice:</u> Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, 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 organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance 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 s.817.155, F.S.

Signature of an authorized person

Russell Ward

Typed or printed name of signee

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

06/06/2019

## TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Premium Performance Marketing LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

THE COUNTY OF THE PARTY OF THE

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC190606181904-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify