

119000009814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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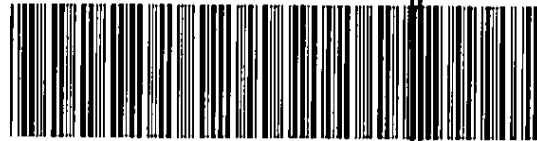
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 SEP 26 PM 2:39

2019 SEP 26 PM 2:39

D. BRUCE  
OCT 16 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Premier Collection, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kasey M Minor

Name of Person

Firm/Company

PO Box 768

Address

Effingham, IL 62401

City/State and Zip Code

kminor@workmangroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kasey M Minor

at (217)

540-8589

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy



\$160.00 Filing Fee, Certificate  
of Status & Certified Copy

2018 SEP 26 PM 2:35

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:

1. The Premier Collection, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

The Premier Collection FL, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Montana 46-2811115  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. The Premier Collection, LLC The Premier Collection, LLC  
(Street Address of Principal Office) (Mailing Address)

124 W. Pine Street PO Box 768

Missoula, MT 59802 Effingham, IL 62401

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

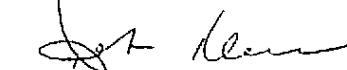
Office Address: 1201 Hays Street

Tallahassee 32301  
(City) , Florida (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Deb Reeves  
Assistant Vice President



(Registered agent's signature)

2013 SEP 26 PM 2:33

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:

☒ Manager      Name: Bennett Law Office PC

☐ Member      Address: 124 West Pine Street

☐ Authorized      Missoula MT, 59802

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: Richard E Workman 2001 Trust

☒ Member      Address: 1200 Network Centre Drive Sui

☐ Authorized      Effingham, IL 62401

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

Title or Capacity:                      Name and Address:

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_

☐ Member      Address: \_\_\_\_\_

☐ Authorized      \_\_\_\_\_

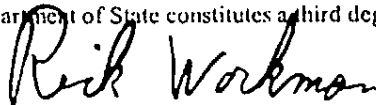
Person \_\_\_\_\_

☐ Other \_\_\_\_\_      ☐ Other \_\_\_\_\_

Important Notice: 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.

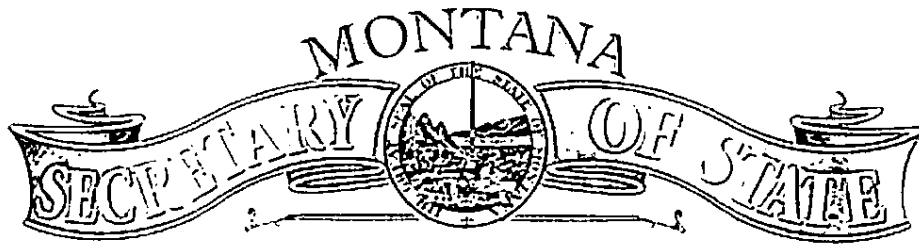


Signature of an authorized person

Richard E Workman

Typed or printed name of signer

2011 SEP 26 PM 3:15



## CERTIFICATE OF FACT

I, **COREY STAPLETON**, Secretary of State for the State of Montana, do hereby certify the following information for the limited liability company:

### **THE PREMIER COLLECTION LLC**

Date Organized: **April 30, 2013**

Term: **Perpetual**

Status: **Active Good Standing**

Jurisdiction: **Montana**

Purpose: **REAL & PERSONAL PROPERTY**

Registered Agent: **Bennett Law Of Granite County LLC**

Agent Physical Address: **9 Bradshaw Lane, Drummond, Montana, 59832, United States**

Agent Mailing Address: **PO Box 7967, Missoula, Montana, 59807, United States**

Principal Office Address: **124 W PINE ST, MISSOULA, Montana, 59802, United States**

Management: **LLC Managed By Managers**

Managers/Members:

- **BENNETT LAW OFFICE, PC, 124 W PINE ST, MISSOULA, Montana 59802, United States**

## History Detail:

- Annual Report 2019 Filed 03/20/2019
- Annual Report 2018 Filed 03/23/2018 ( Agent,Business Address,Principal,Member/Manager )
- Annual Report 2017 Filed 04/13/2017
- Migrated Business Entity Data Filed 08/20/2016
- ARTICLES OF ORGANIZATION Filed 04/30/2013
- AMENDMENT Filed 05/30/2013 ( - REGISTERED AGENT NAME )
- AMENDMENT Filed 05/30/2013 ( - REGISTERED AGENT ADDRESS )
- REPORT Filed 03/04/2014 ( - 2014 E-FILED )
- REPORT Filed 03/06/2015 ( - 2015 E-FILED )
- REPORT Filed 02/26/2016 ( - 2016 E-FILED )



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 23rd day of September, 2019.

**COREY STAPLETON**

Montana Secretary of State

Certificate Number: 092320191821