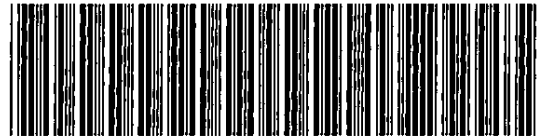


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06/21/06--01051--008 **125.00

EFFECTIVE DATE
7/1/06

69782-28658

FILED
06 JUN 21 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sam

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 23, 2006

TINA M HARRIS
PO BOX 283
CALLAHAN, FL 32011

SUBJECT: T & L, LLC DBA KAY-DEE'S PLACE
Ref. Number: W06000028658

We have received your document for T & L, LLC DBA KAY-DEE'S PLACE and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

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) 245-6851.

Gina McLeod
Document Specialist

Letter Number: 806A00042055

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T & L, LLC dba Kay-Dee's Place
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tina M. Harris
(Name of Person)

T & L, LLC dba Kay-Dee's Place
(Firm/Company)

P. O. Box 283
(Address)

Callahan, FL 32011
(City/State and Zip Code)

For further information concerning this matter, please call:

Tina M. Harris at (904) 403-4248
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

T & L, LLC ~~dba Kay Dee's Place~~ *Delete 1st.*

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

551705 US HWY 1
Hilliard, FL 32046

Mailing Address:

P. O. Box 283
Callahan, FL 32011

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUN 21 PM 12:03

FILED

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:

Tina M. Harris
Name

34097 Daybreak Drive
Florida street address (P.O. Box **NOT** acceptable)

Callahan FL 32011
City, State, and Zip

EFFECTIVE DATE
7/1/06

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, F.S..

Tina M. Harris
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" =Manager

"MGRM" =Managing Member

Name and Address:

MGR

Tina M. Harris

34097 Daybreak Drive

Callahan, FL 32011

MGRM

Lance K. Harris

34097 Daybreak Drive

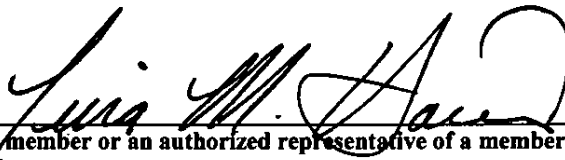
Callahan, FL 32011

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: July 1, 2006 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Tina M. Harris

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)