

L14000009544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

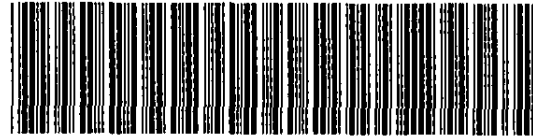
(Business Entity Name)

(Document Number)

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

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DIVISION OF CORPORATIONS  
14 JAN 13 AM 11:15

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②

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TK Properties Florida, LLC  
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:

Christina K. Lamm  
Name of Person

—  
Firm/Company

900 Ruby Ave. SW.  
Address

Vero Beach, FL 32968  
City/State and Zip Code

KimmieLamm@me.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Lamm at (772) 473-8866  
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

Date of this notice: 01-06-2014

Employer Identification Number:  
46-4435997

Form: SS-4

Number of this notice: CP 575 B

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FROM THE DESK OF  

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CHRISTINA LAMM

January 22, 2014

Division of Corporations  
Attn: Jenna  
f 850-245-6030

To Whom It May Concern,

We are aware that the company name we have chosen, TK Properties Florida, LLC, is very similar to an already existing company, TK Properties, Inc.

With this being said, we would like to go ahead and move forward in keeping with our chosen name of TK Properties Florida, LLC.

If you should have any questions, please feel free to contact me.

Regards,



Christina Lamm

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TK Properties Florida, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

980 Ruby Ave. SW  
Vero Beach, FL 32968

980 Ruby Ave. SW  
Vero Beach, FL 32968

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:

Christina K. Lamm

Name

980 Ruby Ave. SW

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

Vero Beach

FL

32968

City

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 605, F.S.*

Christina K. Lamm

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

**Name and Address:**

Christina K. Lamm  
980 Ruby Ave. SW  
Vero Beach, FL 32968

Toby J. Lamm  
980 Ruby Ave. SW  
Vero Beach, FL 32968

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

Christina K. Lamm

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

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Christina K. Lamm

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)

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