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**LAZARUS CORPORATE FILING SERVICE**

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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

MJH

W-18024

300003327843--0

-07/19/00--01024--029

\*\*\*160.00 \*\*\*160.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. TCAG, LLC (Corporation Name) (Document #)

2. \_\_\_\_\_ (Corporation Name) (Document #)

3. 00789-00623-001071 (Corporation Name) (Document #)

4. \_\_\_\_\_ (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 1:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☒ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
00 JUL 19 AM 10:53  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

July 19, 2000

LAZARUS

,

SUBJECT: TCAG, LLC  
Ref. Number: W00000018024

We have received your document for TCAG, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 600A00039550

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 JUL 20 PM 4:59

ARTICLES OF ORGANIZATION OF  
TCAG, LLC  
LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is: TCAG, LLC.

**ARTICLE II — Address:**

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

15725 S.W. 188 Street  
Miami, Florida 33187

**ARTICLE III — Duration:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV — Management:**

The Limited Liability Company is to be managed by a manager or managers and the name and address of the initial manager who is to serve as manager until the appointment of his/her successor is:

JAMES W. KERN  
15725 S.W. 188 Street  
Miami, Florida 33187

**ARTICLE V — Registered Agent:**

The name and street address of the initial registered agent for service of process on the Limited Liability Company is:

Alberto J. Parlade  
PARLADE & FIGUERAS  
7050 S.W. 86 Avenue  
Miami, Florida 33143

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 17<sup>th</sup> day of July, 2000.



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

ALBERTO J. PARLADE, ESQ.

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Typed or printed name of signee Hember

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

TCAG, LLC.

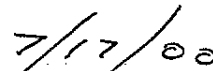
2. The name and address of the registered agent and office is:

Alberto J. Parlade, Esquire  
7050 S.W. 86th Avenue  
Miami, Florida 33143

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 of registered agent and agree to act in its 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.



(Signature)



(Date)