

# L000000010317

## JK HARRIS AND COMPANY

### BRUNSWICK SERVICE CENTER

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BRUNSWICK, GA 31521

PHONE 888-800-6577  
912-264-2116  
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IRS & STATE PROBLEM RESOLUTION - VETERAN IRS AGENTS & TAX PROFESSIONALS - WORLD WIDE WEB [WWW.JKHARRIS.COM](http://WWW.JKHARRIS.COM)

August 16, 2000

Honorable Sandy B. Mortham  
Secretary of State  
Capitol Plaza Level, Room 2  
Tallahassee, FL 32399

L-10317

RE: TODD INSURANCE AGENCY, LLC

Dear Honorable Sandy Mortham:

500003361845--0  
-08/18/00--01015--010  
\*\*\*\*125.00 \*\*\*\*125.00

Enclosed for filing, please find an original and one (1) copy of the Articles of Organization, and Certificate of Designation of Registered Agent/Registration Office, in reference to the above-captioned matter. Also enclosed, is a check in the amount of \$125.00 to cover the filing fees of the Articles.

Please return the stamped copy back to me in the envelope provided.

If you have any questions, please call me at the above number, Ext. 201.

Thank you,

Sandra Anderson  
Administrative Assistant

FILED  
00 AUG 18 PM 1:24  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

4/8/24

3p

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE 1-NAME**

The name of the Limited Liability Company is:

TODD INSURANCE AGENCY, LLC

**ARTICLE 11-ADDRESS**

1506 HALLAM CT. N.  
LAKELAND, FL 33813

**ARTICLES 111-REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENTS**

The name and the Florida street address of the registered agent are:

ROLAND S. TODD, JR.  
1506 HALLAM CT. N.  
LAKELAND, FL 33813

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.

*Roland S Todd Jr*  
Registered Agent's Signature

**ARTICLE IV-MANAGEMENT** (Check box if applicable)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective date is requested)

*Roland S Todd Jr*  
Signature of a member or an authorized representative of a member

(In accordance with section 708,408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROLAND S. TODD, JR.  
Typed or printed name of signee

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00 AUG 18 PM 1:24  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

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:

TODD INSURANCE AGENCY, LLC

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

ROLAND S. TODD, JR.

Name

1506 HALLAM CT. N.

P.O. Box or Mail Drop NOT Acceptable

LAKELAND, FL 33813

City/State/Zip

Having been named as registered agent and to accept service or 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.

Signature

Roland S. Todd Jr.

Date

8/10/00

00 AUG 18 PM 1:24  
CLERK OF STATE  
TALLAHASSEE FLORIDA

FILED