

AIA Florick Corp Services
Requester's Name

Address

City/State/Zip Phone # 921-4840

LD1000013754

Office Use Only

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

1. Treasure Coast Glass & Mirror, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2001 AUG 16 PM 12:50

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 16 PM 2:05

APPROVED
AND
FILED

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-08/16/01--01049--018
****703.75 ****155.00

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:
Treasure Coast Glass & Mirror, LLC

ARTICLE II – Address:

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

3561 SW Pisano St.
Port St. Lucie, FL 34953

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Larry Sisson

Name

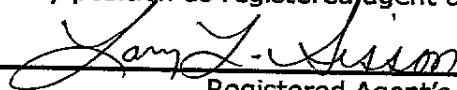
218 Southern Country Lane

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

Quincy, FL 32351

City, State, and 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 608, F.S..



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.

Article V – Members

Member #1

Daniel M. Turner
3561 SW Pisano St.
Port St. Lucie, FL 34953

Member #2

Jonaha Caudhill
2015 South 10th St.
Ft. Pierce, FL 34950

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TALLAHASSEE, FLORIDA

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

Larry Sisson
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.)

Larry Sisson

Typed or printed name of signee

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