L01000016056

DAJA Services

Derava Ave.

Office Use Only

Examiner's Initials

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

1.		2000045240320 -08/08/25-01043005
(Corporation Name)	(Document #)	***** 125.00 ****125.00
2. (Corporation Name)	(Document #)	OI SECT
3. (Corporation Name)	(Document #)	FILED PI 8 PH ETARY OF AHASSEE,
4(Corporation Name)	(Document #)	E, FLORID.
☐ Walk in ☐ Pick up time		Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	$\mathcal{U}_{\mathcal{A}}$
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A Change of Register Dissolution/Withdom	red Agent
OTHER FILINGS	REGISTRATION/QU	ALIFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	p



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 9, 2001

D.N.A. SERVICES 2426 GERARD AVENUE JAXSONVILLE, FL 32207

SUBJECT: D.N.A. SERVICES, LLC Ref. Number: W01000018475

We have received your document for D.N.A. SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 301A00045910

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABII **ARTICLE I - Name:** TNA Services LLC The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: 2426 Gerard ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Florida street address (P.O. Box NOT acceptable) 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.. 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) 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

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5.00 Certificate of Status (Optional)