

LO20000014939

To: Registration Section Division of Corporations.

From: Michael and Laura Vandegrift.

Subject: Application for L.L.C.

500005767235--9

-06/14/02--01047--019

****125.00 ****125.00

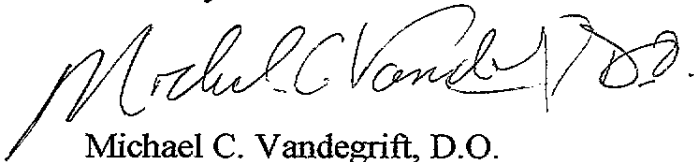
To Whom It May Concern:

As requested in the application, here is a cover letter providing our name, address and daytime phone number.

Michael C. Vandegrift, D.O. & Laura M. Vandegrift
21347 Colwell Apt #11
Farmington Hills, MI 48336
(248) 615- 4380

Thank you for your time and effort in this matter.

Sincerely.


Michael C. Vandegrift, D.O.

APPROVED
AND
FILED
02 JUN 14 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JB
6-17-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: TIGA ENTERPRISES, LLC

ARTICLE II - Address:

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

21347 COLWELL APT 11
FARMINGTON HILLS, MI 48336

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

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

MRS. ERICA HAMM
Name
403 WEST RIVERSIDE DR
Florida street address (P.O. Box **NOT** acceptable)
TEQUESTA FL 33469
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..

Erica K Hamm

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)

Laura M. Vandegrift
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.)

LAURA M. VANDEGRIFT

Typed or printed name of signee

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)

02 JUN 16 AM 10:08
RECEIVED
FEBRUARY 16, 2016
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

This is a member-
managed company
LAURA VANDEGRIFT
MICHAEL VANDEGRIFT
21347 COLWELL APT 11
FARMINGTON HILLS, MI 48336