

LD2000031389

TPF HOMER, LLC

(Requestor's Name)

3630 NW 85th Way #105

(Address)

A

(Address)

SUNRISE, FL 33351

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

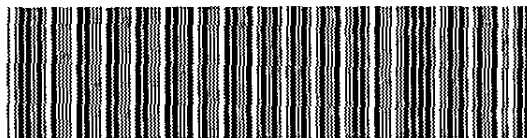
(Business Entity Name)

(Document Number)

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AND
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02 NOV 21 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FL 32304

JB
11-22-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
TPF HOMES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
3630 NW 85TH WAY #105
SUNRISE, FL 33351

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

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

SHOMARI SCOTT

Name

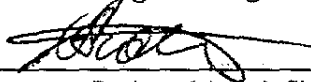
3630 NW 85TH WAY #105

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

SUNRISE, FL 33351

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

(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.)

NADINE BELL

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)

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