

LD 20 00034498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

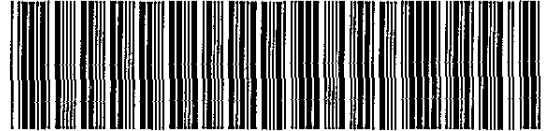
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500009461325

12/23/02--01017--014 \*\*155.00

RECEIVED  
02 DEC 23 AM 10:03  
DIVISION OF CORPORATION

12/23/02 12:33  
LISE ALLEN  
OFFICE OF THE CLERK

APPROVED  
AND  
FILED

TB

Charter Number Only

VALIDATION ONLY

Requestor's Name  
Address  
City State ZIP Phone

CORPORATION(S) NAME

Tiger Dolphin Enterprise LLC

- ☐ Profit ☐ Amendment ☐ Merger  
☐ NonProfit ☐ Foreign ☐ Dissolution ☐ Mark  
☐ Limited Partnership ☐ Annual Report ☒ Other  
☐ Reinstatement ☐ Reservation ☐ Change of Registered Agent  
☒ Certified Copy ☐ Photo Copies ☐ Certificate Under Seal

- ☐ Call When Ready ☐ Call If Problem ☐ After 4:30  
☒ Walk In ☐ Will Wait ☒ Pick Up ☐ Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

Empire Toll Free: 1-800-432-3028

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

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

TigerDolphin Enterprise , LLC

**ARTICLE II – Address:**

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

7027 West Broward Blvd. #196  
Plantation, FL 33317

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

The name and the Florida street address of the registered agent are: (P.O. Box NOT acceptable)

Michael Wright  
7027 W. Broward Blvd. , Apt. 196  
Plantation, FL 33317-2208

*Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designate4d 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.)**

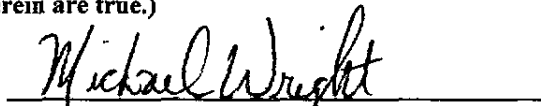
☐

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

(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.)

  
\_\_\_\_\_  
Typed or printed name of signee

FILED  
02 DEC 23 PM 12:33  
CLERK OF DISTRICT COURT  
FLORIDA  
PLANTATION