

LD30000002971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

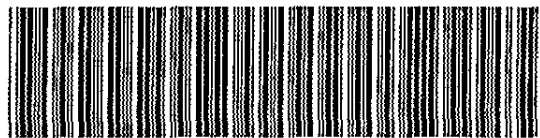
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200010382212

01/24/03--01041--004 **125.00

03 JAN 24 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

1-27-03

JOHN COSTA
407 BRYANT CT
FISHKILL NY 12524

DAYTIME PHONE ~~4~~ ~~AKS~~
845-227-4697
845-496-5569

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JAN 24 AM 9:50

APPROVED
AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

T.M.D. ASSO "LLC"

ARTICLE II - Address:

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

407 BRYANT ST
FISHKILL NY 12524

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

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

JOHN COSTA
Name
3023 S ATLANTIC AVE
Florida street address (P.O. Box NOT acceptable)
DAYTONA BEACH FL 32114
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.

John Costa
Registered Agent's Signature

03 JAN 26 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

John Costa
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.)

JOHN COSTA
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)