## L03000025114

. (Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	:#)			
PICK-UP	TIAW	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



900020968419

07/07/03--01073--003 \*\*260.00

DIVISION OF CORPORATIONS

03 JUL -7 PM 1: 02

47/10

## TRANSMITTAL LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Name of Limited Liability Company)  The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Hope G. Jochem  (Name of Person)  Tournesol Ltd. Co.  (Firm/Company)  322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)  For further information concerning this matter, please call:		
Please return all correspondence concerning this matter to the following:  Hope G. Jochem  (Name of Person)  Tournesol Ltd. Co.  (Firm/Company)  322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)		
Hope G. Jochem  (Name of Person)  Tournesol Ltd. Co.  (Firm/Company)  322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)		
(Name of Person)  Tournesol Ltd. Co.  (Firm/Company)  322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)		
Tournesol Ltd. Co.  (Firm/Company)  322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)		
(Firm/Company)  322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)		
322 Georgia Ave.  (Address)  Stuart, Florida 34994  (City/State and Zip Code)		
(Address)  Stuart, Florida 34994  (City/State and Zip Code)	-	
Stuart, Florida 34994 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Patty D. Downing at ( 772 ) 288-2122		
(Name of Person) (Area Code & Daytime Telephone	Number)	
STREET ADDRESS: MAILING ADDRESS:		
tegistration Section Registration Section		
Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327		
Tallahassee, Florida 32399 Tallahassee, Florida 32314		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Tournesol Ltd. Co.

The name of the Limited Liability Company is:

Stuart

Principal Office Add	<u>iress:</u>	Mailing Address:		
322 Georgia Ave.		`322 Georgia Ave.		
Stuart, Florida 34994		Stuart, Florida 34994	Stuart, Florida 34994	
ARTICLE III - Kegi	stered Agent, Registered	Office, & Registered Agent's Signature:	=	
_	stered Agent, Registered rida street address of the r	S 3	OISIVIC	
The name and the Flo		8	SIVISION OF	
The name and the Flo	rida street address of the r	egistered agent are:	UNISION OF COR	
The name and the Flo	rida street address of the r Patricia D. Downing	S 3	UNISION OF CORPOR	

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.

34994

Registered Agent's Signature

City, State, and Zip

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:
"MGR" = Mana	ger naging Member	
	naging intemper	
"MGR"		Hope G. Jochem
	The second second	322 Georgia Ave.
	-	Stuart, Florida 34994
:		
	<del>-</del>	Hope G. Jochem
•		
	<del></del>	and the second s
	and the same of the same of	
		-
(Use attachment	t if necessary)	
NOTE: An ad	ditional article must b	e added if an effective date is requested.
REQUIRED SI	Hase	de de la member.
	(In accordance with sec of this document const that the facts stated he	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury rein are true.)
	Hope G. Jochem	
	Ту	ped 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)