

L03000028017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

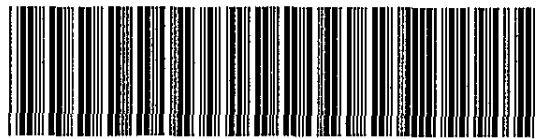
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000021700250

07/24/03--01054--003 **125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 PM 3:29

W27/30

Re: Establishing an LLC

From: John Tompkins

**Address: 4823 Longwater Way
 Tampa, FL 33615**

Daytime Phone #: 813.215.3278

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 PM 3:29

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3G INVESTMENT GROUP LLC
(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:

JOHN TOMPKINS
(Name of Person)

(Firm/Company)

4023 LONGWATER WAY
(Address)

TAMPA, FL 33615
(City/State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 PM 3:29

For further information concerning this matter, please call:

JOHN TOMPKINS at (813) 215-3278
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

39 INVESTMENT GROUP LLC

ARTICLE II - Address:

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

Principal Office Address:

4823 LONGWATER WAY
TAMPA, FL 33615

Mailing Address:

4823 LONGWATER WAY
TAMPA, FL 33615

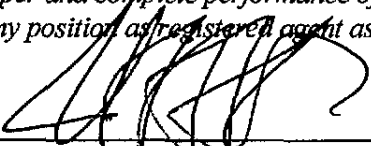
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

JOHN TOMPAINS
Name
4823 LONGWATER WAY
Florida street address (P.O. Box NOT acceptable)
TAMPA FL 33615
City, State, and Zip

FILED
03 JUL 24 PM 3:29
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

JOHN TOMPKINS
4923 LONGWATER WAY
TAMPA, FL 33615

MGRM

BRIAN RANKIN
203 ~~ABRAHAM~~ ABBOTT GLEN COURT
NASHVILLE, TN 37215

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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 TOMPKINS

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUL 24 PM 3:29