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PALACH OF CORPORATIONS

AND ACCEPTED A

Kuiet Kut Landscaping ,LLC 2220 S.W. 146th Street Newberry, Florida 32669

Voice: 352.332.5283 Fax: 352.333.668 Mobile: 352.745.2774

103 CO TONO 100 CO

August 25, 2003

Attached to this letter are the completed articles of organization for TNT Farms, LLC and a check for the fees related to its processing. If you have any question please contact me or my manager at:

TnT Farms
2220 S.W. 146th Street
Newberry, Florida 32669
352.332.5283
352.333.668 fax
352.745.2774 cell

If I can be of any future assistance please do not hesitate to contact me.

Thank you,

Patrick Capella / tom tonnelier

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: TNT FARMS 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:
Tom TonnFLIER (Name of Person)
TNT FARMS (Firm/Company)
2220 S.W. 146 Th ST (Address)
NEW BERRY FL 32669 (Cht/State and Zip Code)
For further information concerning this matter, please call:
Pat Cape 1/2 at 752 732-56 89 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

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

TO: Registration Section

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:	IT FARMS LLC
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
TOM TONNELIER 2220 SW. 146Th ST New berry, Fl 32665	1410 n.w. 214 zue 921064112, 7/2.
ARTICLE III - Registered Agent, Registered Office,	& Registered Agent's Signature:
The name and the Florida street address of the registered Name	
Florida street address (P.O. Box NO New benry FL 3) 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

(CONTINUED)

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

	•	- •	
<u>Title:</u> "MGR" = Manager "MGRM" = Manag		Name and Address:	
MGRM		TOM TONNELIER 14110 N.W. 21ST LI GAINSVILLE FI 326 PAT CAPELLA 1525 S.W. 22ND AV GAINESVILL, FI 32	U 00 1 <u>e</u> 6c 7
(Use attachment if a NOTE: An addition	•	added if an effective date is requested.	2003
	Signature of a member of this document constituthat the facts stated herein	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution ties an affirmation under the penalties of perjury in are true.)	SEP-2 PM 12: 38 ALLAHASSEE, FLORIDA
		Filing Faces	

<u>Filing Fees:</u>
\$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)