

W03000038770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

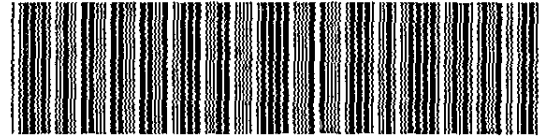
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/03/03--01079--026 **155.00

EFFECTIVE DATE
1-2-04

W03-38770
JK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P T 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:

Donna Talley
(Name of Person)

(Firm/Company)

1659 Brandywine Rd #6313
(Address)

West Palm Beach FL 33409
(City/State and Zip Code)

For further information concerning this matter, please call:

Donna Talley at (561) 254-8812
(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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

P T, LLC

ARTICLE II - Address:

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

Principal Office Address:

8134 Anice Grove LN #A
Orlando, FL 32818

Mailing Address:

8134 Anice Grove LN #A
Orlando FL 32818

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

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

Donna Talley
Name

1659 Brandywine Rd #6313
Florida street address (P.O. Box NOT acceptable)

West Palm Beach FL 33409
City, State, and Zip

EFFECTIVE DATE
1-2-04

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..

Donna Talley
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

AA Tim Talley
8134 Anice Grove Ln # A
Orlando, FL 32818

Wayne Pauley
1217 Neely's Bend Rd
Madison, TN 37115

Donna Talley
8134 Anice Grove Ln #A
Orlando FL 32818

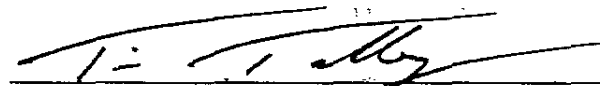
Alison Triplet
1217 Neely's Bend Rd
Madison, TN 37115

(Use attachment if necessary)

Devin Talley
8134 Neely's Bend Rd
Orlando, FL 32818

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.)

Tim Talley
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)

EFFECTIVE DATE JAN 2, 2004