

L04000004982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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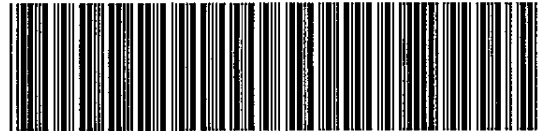
X

Certificates of Status

X

Special Instructions to Filing Officer:

Office Use Only



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01/20/04--01020--025 **160.00

RECEIVED
04 JAN 20 PM 12:12
DATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

BR

FILED
04 JAN 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
NOT REFILED DATE
2/1/04

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T&T Reports and Services, 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:

Jack Traylor
(Name of Person)

T&T Reports and Services, LLC
(Firm/Company)

711 Twin Oaks Lane
(Address)

Tallahassee, FL 32312
(City/State and Zip Code)

For further information concerning this matter, please call:

Jack Traylor at (850) 402-0250
(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

RECEIVED
FILED
JAN 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

EFFECTIVE 12/1/04
FILED
04 JAN 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

T&T Reports and Services, LLC

ARTICLE II - Address:

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

Principal Office Address:

711 Twin Oaks Lane

Tallahassee, FL 32312

Mailing Address:

PO Box 4246

Tallahassee, FL 3131⁵2-4246

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

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

Jack Traylor

Name

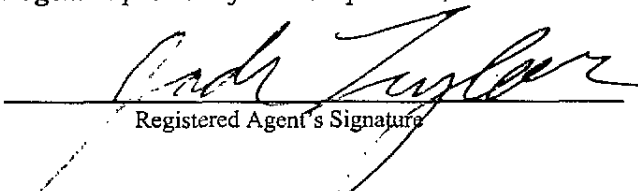
711 Twin Oaks Lane

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee, FLORIDA 32312

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, Florida Statutes..



Registered Agent's Signature

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:

MGR *m*

Jack Traylor

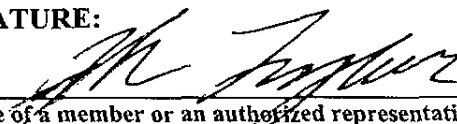
711 Twin Oaks Lane

Tallahassee, FL 32312

(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.)

Jack Traylor

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)

ARTICLE V – AMENDMENT – Effective Date

The effective date of incorporation shall be February 1, 2004.