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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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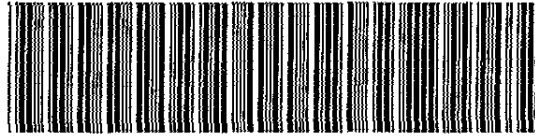
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN FEB 20 2004

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February 9, 2004

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: T&M Real Estate Development, LLC
Our File No: 6041.04-3783-1-19

Dear Division of Corporations Filing Clerk:

Please see enclosed a transmittal letter with Articles of Organization for Florida Limited Liability Company in regard to the above-referenced entity. Please stamp a copy of the transmittal letter and return it to me in the enclosed, self-addressed, stamped enveloped. Also enclosed herein is a check in the amount of \$160.00 which includes the following filing fees:

1. \$100.00 filing fee for Articles of Organization;
2. \$25.00 designation of registered agent;
3. \$30.00 certified copy; and
4. \$5.00 certificate of status.

If you have any questions or need additional information, please feel free to contact me. Your cooperation in regard to this matter is very much appreciated.

Sincerely,



Samuel S. Ross

Enclosures

cc: Todd Rappaport

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TALLAHASSEE, FLORIDA

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

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TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

T & M Real Estate Development, LLC**ARTICLE II - Address:**

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

Principal Office Address:1901 North First StreetSuite 1206Jacksonville Beach, FL 32250**Mailing Address:**1901 North First StreetSuite 1206Jacksonville Beach, FL 32250**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

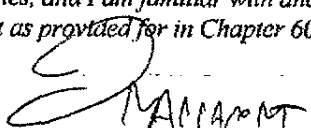
Todd Rappaport

Name

1901 North First Street, Suite 1206Florida street address (P O. Box **NOT** acceptable)Jacksonville Beach, FL 32250

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..


Todd A. RAPPAPORT
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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

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

Title:

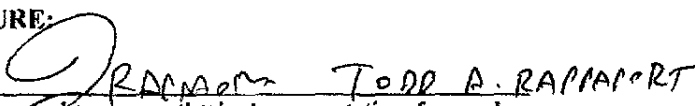
"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMTodd Rappaport1901 North First Street, Suite 1206Jacksonville Beach, FL 32250

(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.)

Todd Rappaport

Typed or printed name of signer

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)