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2004 MAR 17 P 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

2004 MAR 17 P 12:45

SUBJECT: Tomcorp, LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas H. Penquite
(Name of Person)

Tomcorp LLC
(Firm/Company)

2800 Broadway Av
(Address)

West Palm Beach, FL 33407
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas H. Penquite at 888, 877-8943
(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
TOMCORP, LLC
A Florida Limited Liability Company**

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2004 MAR 17 P 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

ARTICLE I NAME

The name of the limited liability company shall be: **Tomcorp, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address for this limited liability company shall be:
2800 Broadway, West Palm Beach, FL 33407

ARTICLE III PURPOSE

This limited liability company is organized for the purpose of acting as owner and manager of Type III Group Homes, and to transact any or all other lawful business under the laws of the State of Florida.

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Thomas H. Penquite, 2800 Broadway, West Palm Beach, Florida 33407

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 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 VIII MANAGERS OR MANAGING MEMBERS:

The name and address of each person who is to serve as a Manager or Managing Member is:

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TITLE	NAME	ADDRESS
MGRM	Thomas H. Penquite	4306 Crestdale Street, Palm Beach Gardens, FL 33409
MGRM	Cortlandt Snow	5600 N Flagler Drive, West Palm Beach. FL 33407

2004 MAR 17 P 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII DURATION

This limited liability company shall commence on the date these Articles are filed with the Florida Department of State and be perpetual in duration.

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.)

Thomas H. Penquite
Typed of 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)