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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Tallen Builders, LLC	OF JUN-3 PH 3:
	Art of Inc. File
	Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search
Signature Requested by:	Fictitious Search Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File
Name Date Time	UCC 11 Search UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF ORGANIZATION OF TALLEN BUILDERS, LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I - Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "Tallen Builders, Limited Liability Company."

ARTICLE II - Address:

The mailing address and street address of the principal office of the Company is: <u>2531</u> NW 35th Street, Ocala, FL 34475.

ARTICLE III - Registered Agent:

The name and the Florida street address of the initial registered agent are: <u>Stephen Allen</u>, 2531 NW 35th Street, Ocala, FL 34475.

ARTICLE IV — Management:

The Company is to be managed by the members.

ARTICLE V — Limitation on Agency Authority of Members:

Pursuant to section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

ARTICLE VI — Operating Agreement

Any Operating Agreement (as defined in Section 608.402(24) of the Act), relating to this Limited Liability Company must be in writing and signed by all of the members.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 14 day of 2004.

STEPHEN ALLEN

. * 1, <u>STEPHEN ALLEN</u> , accept the office of Registered. * <u>Street</u> , <u>Ocala</u> , <u>FL 34475</u> , the registered office of the	ered Agent. I am located at <u>2531 NW 35</u> th is corporation.
	The fill
S ⁻	ΓΕΡΗΕΝ ALLEŃ, Registered Agent
STATE OF FLORIDA COUNTY OF MARION The foregoing instrument was acknowledged before 2004 by <u>STEPHEN ALLEN</u> , as Incorporator and <u>STE</u>	me this day of Allen, as Registered Agent, who:
A) is/are personally known to me who has/have produced a drive other identification: B) did OR did not take an or	er's license <u>OR</u>
Signature of Notary Public Print Name: SHERRI L. WADDEY	AFFIX SEAL/EXPIRATION DATE:
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