

L04000044066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

EFFECTIVE DATE

6-1-04

Office Use Only



600037498396

06/09/04--01049--012 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JUN -9 AM 10:33

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TEED OFF, LLC
(Name of Limited Liability Company)

EFFECTIVE DATE
6-1-09

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

Please return all correspondence concerning this matter to the following:

JOSEPH N. FELLER, CPA
(Name of Person)

JOSEPH N. FELLER, CPA, PA
(Firm/Company)

8188 SOUTH CORAL CIRCLE
(Address)

NORTH LAUDERDALE, FL 33068
(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH N. FELLER, CPA at (954) 726-9078
(Name of Person) (Area Code & Daytime Telephone Number)

SECRET
TALLAHASSEE, FLORIDA

04 JUN -9 AM 10:33

FILED

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
TEED OFF, LLC**

The undersigned individuals of a limited liability company formed under the Florida Limited Liability Company Act hereby adopt the following Articles of Organization:

Article I – Name

EFFECTIVE DATE

6-1-04

The name of the limited liability company is Teed Off, LLC

Article II – Address

The mailing address and street address of the principal office of the limited liability company is:

Principal Office Address

22608 S.W. 64 Way
Boca Raton, FL 33428

Mailing Address

22608 S.W. 64 Way
Boca Raton, FL 33428

Article III – Registered Agent, Registered Office and Registered Agent's Signature

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

Joseph N. Feller, CPA
8188 South Coral Circle
North Lauderdale, FL 33068

FILED
04 JUL -9 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



Joseph N. Feller, Registered Agent

Article IV – Management

The business of the limited liability company shall be conducted under the exclusive management of the managing members who shall have the sole authority to act for the limited liability company in all matters. The name and street address of the managing members are William C. Jorgenson and Casey W. Jorgenson, 22608 S.W. 64 Way, Boca Raton, Florida 33428.

Article V – Effective Date

These Articles of Organization are to be effective on the 1st day of June, 2004.

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.


William C. Jorgenson, Managing Member

FILED
04 JUN -9 AM 10:33
STATE CLERK OF
TALLAHASSEE, FLORIDA