L04000074835

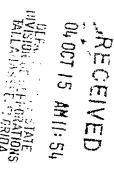
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified CopiesCertificates of Status
Special Instructions to Filing Officer:

Office Use Only



900041713609

10/15/04--01054--017 **160.00



FILED

4 OCT 15 MH II: 57

SEORET/RY OF STATE
SEORET/RY OF FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Robert Tucker "L.L.C." (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:
Robert Tuker (Name of Person)
Robert Tucker L.L. (" (Firm/Company)
54 Ronning Deer Ln. (Address)
Crawfordville FL 32327 (City/State and Zip Code)
For further information concerning this matter, please call:
Robert Tule at (850) 926-5020 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314

·
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANYA
ARTICLE I - Name: The name of the Limited Liability Company is:
Pabert Tucker 'L.L.C'.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
54 Rinning Doer Lu. 54 Rouning Deer Lr. Crawford ville FC. Crawford ville FC. 32327
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Robert Tucher
54 Running Deer Ln. Florida street address (P.O. Box NOT acceptable)
FL 37.32.7

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, F.S..

Registered Agent's Signature

City, State, and Zip

(CONTINUED)

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" = Manager	Name and Address:
"MGRM" = Managing Member 11 G R M	Robert Tuchen "MGRM' 54 Running Dear La CrawFord villa FC 32327
	TSE OF THE
(Use attachment if necessary)	added if an effective date is requested.
NOTE: An additional article must be	e added if an effective date is requested.
Signature of a member	or an authorized representative of a member.
of this document constit that the facts stated here	
- Kisber Typ	ed 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)