

L04000086113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

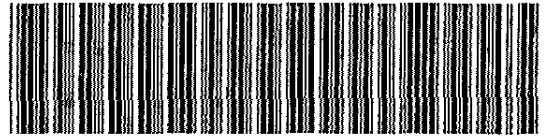
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 22, 2004

THOMAS BENJAMIN  
10400 S. TAMiami TRAIL  
VENICE, FL 34287

SUBJECT: THOMAS BENJAMIN LLC  
Ref. Number: W04000039036

We have received your document for THOMAS BENJAMIN LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please list the title for the person listed on the second page.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick  
Document Specialist

Letter Number: 604A00060997

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RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Thomas Benjamin 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:

Thomas Benjamin  
(Name of Person)

Thomas Benjamin L.L.C  
(Firm/Company)

10400 S. Tamiami Trail  
(Address)

VENICE FL 34287  
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Benjamin at (941) 468-7244  
(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

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Thomas Benjamin LLC

**ARTICLE II - Address:**

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

Principal Office Address:

Mailing Address:

10400 S TAMiami TRAIL  
VENICE FL 34287

SAME

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Thomas Benjamin  
Name

10400 S. TAMiami TRAIL  
Florida street address (P.O. Box NOT acceptable)

VENICE FLORIDA 34287  
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..*

Thomas Benjamin  
Registered Agent's Signature

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**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

MGRM

**Name and Address:**

Thomas Benjamin  
10400 S Tamiami TRAIL  
VENICE FL 34287

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

Thomas Benjamin  
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 BENJAMIN  
Typed 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)**