## L05000012949

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
	) N	

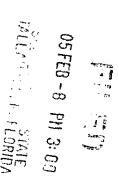
Office Use Only



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DIVISION OF CORFORATION



## CAPITAL CONNECTION, INC.

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

174 Honard's Punting + chamasyrte GA 8/00

TAO, LLC	ALLER OF THE STATE
Signature	Art of Inc. File LTD Partnership File Boreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Vehicle Search Driving Record
Requested by:  Name  Date  Time  Walk-In  Will Pick Up	UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	ny ice
• •	my is.
TAO, LLC	ny is:
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
404 S. Newport Avenue	404 S. Newport Avenue
Tampa, Florida 33606	Tampa, Florida 33606
	· ————————
The name and the Florida street address o Stamatakis, P.A.	Name
	Drive, Ste. 525
2701 North Rocky Point	
Florida str	eet address (P.O. Box NOT acceptable)
Florida str Tampa, Florida 33607	reet address (P.O. Box <u>NOT</u> acceptable)  FL
Florida str Tampa, Florida 33607	reet address (P.O. Box NOT acceptable)

(CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Γitle:</u>	Name and Address:
'MGR" = Manager	
'MGRM" = Managing Member	
Use attachment if necessary)	
NOTE: An additional article mu	ist be added if an effective date is requested.
	•
REQUIRED SIGNATURE:	
<i>(</i>	
_	
Signature of a men	nber or an authorized representative of a member.
of this document co	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury ded herein are true.)
	Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)