

L05000016902

LISA MINCY

(Requestor's Name)

317 WATER STREET

(Address)

(Address)

APALACHICOLA FL 32321

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☒ MAIL

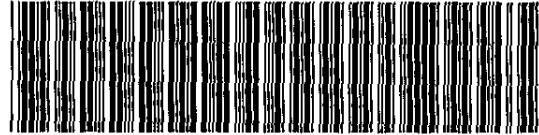
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/18/05--01054--005 \*\*100.00

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05 FEB 18 PM 12:49  
DIVISION OF REGISTRATION

05 FEB 18 PM 1:06  
TALLAHASSEE, FLORIDA

FILED

4 8 PM FEB 7 2005

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TIGER LILY TRIM LLC

ARTICLE II - Address:

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

Principal Office Address:

LISA MINCY  
317 WATER STREET  
APALACHICOLA FL 32321

Mailing Address:

LISA MINCY  
317 WATER STREET  
APALACHICOLA FL 32321

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

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

LISA MINCY  
Name

317 WATER STREET  
Florida street address (P.O. Box **NOT** acceptable)

APALACHICOLA FL 32321  
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, F.S..*

Lisa Mincy  
Registered Agent's Signature

(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" = Managing Member

**Name and Address:**

MGRM

LISA MINCY  
317 WATER STREET  
APALACHICOLA FL 32321

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(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Lisa Mincy  
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.)

LISA MINCY  
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)