L05 0000 20920

(Requestor's Name)
(Adjudate, & Halle)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certificates of Status
Special Instructions to Filing Officer:
3/2
Office Use Only



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THE VIEW

05 MAR -2 MIII: 3

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: LERRY / hurs (Name of I	MCN LLC Limited Liability Company)	
The enclosed Articles of Organization and fee(s) a		
Terry Thurma (Name of Person)	SECH ALLA	*****
Terry Thurnar (Firm/Company) 1752 B Hwy 90 (Address)	IAR -2 AHII: 34 HASSEE, FLORID	20.00
Chipley FL 32 (City/State and Zip Code)	2428	
For further information concerning this matter, ple	ease call:	
Terry Thurner (Name of Person)	at (<u>\$50</u>) <u>438-9806</u> (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
STREET ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Terry Thurman	LLC	-	·	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liabil	ity Compa	ıny is:	
Principal Office Address:	Mailing Address:			
1752 B HWY 90	Same	SEC	<u>6</u>	
cupied in 327 00	- 3	- 	20	ľ
ARTICLE III - Registered Agent, Registere The name and the Florida street address of the Takky This	registered agent are:	gnaffire:	-2 AM III 3h	
Florida street address (P. Chipley FL City, State,	.O. Box <u>NOT</u> acceptable) FL 32428			

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

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Terry Thurman 1752 B Huy 90 Chipley FL 32428	
		·
	Ā	<u> </u>
(Use attachment if necessary)	LAHASSEE,	05 MAR -2 A
NOTE: An additional article must be	added if an effective date is requested.	MII: 34

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.)

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)