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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		· 2.		
SUBJECT: TWR INVESTMENTS, LLC (Name of Limited Liability Company)				
The enclosed Articles of Organization and i	Cee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
Mary.	(Name of Person)			
TWR TNUESTIMENTS LLC (Firm/Company)				
410 ROBIN HOOD CIRCLE #102				
(Address)  Naples FL 34104-9482  (City/State and Zip Code)				
For further information concerning this mat	ter, please call:			
MARY W. LAHAN (Same of Person)	at ( 239 352 (Area Code & Daytime T	~ 872 c elephone Number)		
Enclosed is a check for the following an	iount:	ZUUS TALLI		
□ \$125.00 Filing Fee	atus	\$160.00 Filling Fee, Certificate of Slatus & Certified Copy. (additional copy is enclosed)		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section Some Section Sec		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:								
The name of the Limited Liability Company is:  TWR TNUESTMENTS, 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:		
					410 ROBIN HOOD CIRCLE #102 NAPLES, FL 34104-9482	Same		
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:							
The name and the Florida street address of the r	registered agent are:							
MARU W. LA	PHAN							
MARY W. LAHAN Name								
HIO ROBIN HOOS CIRCLE #102 Florida street address (P.O. Box NOT acceptable)								
Florida street address (P.O. Box NOT acceptable)								
NAPLES	FL 34104-9482							
<u>NAALES</u> FL 34104-9482 City, State, and Zip								
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all informance of my duties, and I am familiar with and stered agent as provided for in Chapter 60& F.S							
registered Agent s	o orkinature 5th 2							

(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 (Manager) MARY W. LAHAN And Poblin Hook Circle Manager To Manager

TYAPLES, TC 34104-9482

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:** 

Signature of a member of 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 brinted 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)