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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
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TRANSMITTAL LETTER

	ration Section on of Corporations				
SUBJECT:	TTB Proper	rties, LLC			
	(Name of Limite	d Liability Compa	my)		
	rticles of Organization and fee(s) are s				
Piease return ai	I correspondence concerning this matte	er to the following	•		
	Richard K	. Thurston Name of Person)			
	(Name of Ferson)			
	TTB Proper	tiae IIC			
		(Firm/Company)	<u> </u>		-
	8900 S. H	wy 17-92			
		(Address)			
	Maitland,	FL 32751			
	(City	/State and Zip Code)	-	,
For further info	ormation concerning this matter, please	call:		SECT.	05 APR 18 FM12: 20
			000 0000		
Rich	nard K. Thurston (Name of Person)	at (407	339-0080	ephone Number)] در
27 1 - 1 1 ·	,	(Alea Cou	e & Dayunic Te	TASE TARREST T	: :ZI JE
Enclosed is a	check for the following amount:			¥π	0.5
∃ \$ 125.00 Fili	ing Fee \$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fine Certified Copy (additional copy)	у	2 \$160.00 Filing Fe Certificate of Status & Certified Copy (additional copy is enclosed	æ, &
	STREET ADDRESS: Registration Section Division of Corporations		MAILING AI Registration Se	ection	

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is: TTB Properties LLC				
The mailing address and street add	dress of the principal office of the Limited Liabili	ty Company is:		
Principal Office Address:	Mailing Address:			
8900 S. Hwy 17-92	8900 S. Hwy 17-92			
Maitland FL 32751	Maitland FL 32751			
ADDICE BY David LA	A Particular Company of the Company			
ARTICLE III - Registered Agei	nt, Registered Office, & Registered Agent's Sig	nature:		
The name and the Florida street ac	ddress of the registered agent are:			
	Richard K Thurston			
	Name			
	8900 S Hwy 17-92	75. OS		
	Florida street address (P.O. Box NOT acceptable)	APR		
	Maitland _{FL} 32751	50 11		
	City, State, and Zip	P		
liability company at the place of registered agent and agree to act	agent and to accept service of process for the above designated in this certificate, I hereby accept the ap- in this capacity. I further agree to comply with the	pointment as provisions of all		
~ ^ -	nd complete performance of my duties, and I am fan osition as registered agent as provided for in Chapt			
/	DiOX St			
Re	egistered 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	Richard K. Thurston			
	17520 Cobblestone Lane			
	Clermont, FL 34711			
MGRM	Ronald J. Thurston			
	342 Kentucky Blue Circle			
	Apopka, FL 32712			
MGRM	Bradford P. Becorest			
	16410 Bayridge Dr.			
	Clermont, FL 34711			
(Use attachment if necessary)				
NOTE: An additional article must be added if an effective date is requested.				
REQUIRED SIGNATURE:				
	7			

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:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECULLITY OF STATE