

L05000058236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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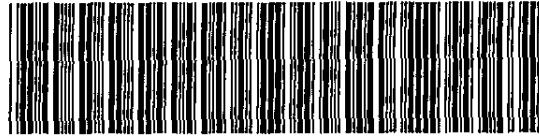
(Business Entity Name)

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TALLAHASSEE, FLORIDA

J. BRYAN JUN 14 2005



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 424465 7490636

AUTHORIZATION :

*Patricia Pigute*

COST LIMIT : \$ 155.00

ORDER DATE : June 13, 2005

ORDER TIME : 2:28 PM

ORDER NO. : 424465-005

CUSTOMER NO: 7490636

CUSTOMER: Mr. Kevin H. Hendrickson  
Kevin H. Hendrickson, P.a.

310 South Second Street

Fort Pierce, FL 34950

111111  
2005 JUN 13 PM 4:36  
CORPORATIONS  
FORT PIERCE, FLORIDA

DOMESTIC FILING

NAME: THOMAS AND COMPANY, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 2935

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida. The effective date of Incorporation will be the date of filing of these Articles.

**ARTICLE I - NAME**

The name of the Limited Liability Company is **THOMAS AND COMPANY,  
LLC**

**ARTICLE II - ADDRESS**

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

**Principal Office Address:**

310 South 2d Street  
Fort Pierce, FL 34950

**Mailing Address:**

310 South 2d Street  
Fort Pierce, FL 34950

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**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE  
& REGISTERED AGENT'S SIGNATURE**

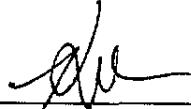
The name and the Florida street address of the registered agent are

Kevin Hendrickson  
Name

310 South 2d Street  
Florida street address

Fort Pierce, FL 34950.  
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.*



Registered Agent's Signature

**ARTICLE IV - MANAGER(S) or MANAGING MEMBER(S)**

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

**Title:**

**Name and Address:**

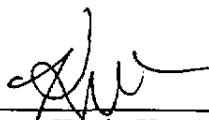
MGR

Kevin Hendrickson  
8390 Hidden Pines Road  
Fort Pierce, FL 34945

MGRM

Diane L. Pugh-Hendrickson  
8390 Hidden Pines Road  
Fort Pierce, FL 34945

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Kevin Hendrickson

(In accordance with section 608.408 (3), Florida Statutes, the execution of this document constitutes as affirmation under the penalties of perjury that the facts stated herein are true.)