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ST. CLAIR COUNTY  
TALLAHASSEE, FLORIDA

05 JUN 15 PM 12:50

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tallahassee Investment Club of Florida  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles E. Smith  
(Name of Person)

Tallahassee Investment Club of Florida  
(Firm/Company)

1039 Corby Court  
(Address)

Tallahassee FL 32317  
(City/State and Zip Code)

For further information concerning this matter, please call:

Charles E. Smith at (850) 656-5553  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

WOS-25555

05 JUN 15 PM 12:50  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 20, 2005

CHARLES E. SMITH  
TALLAHASSEE INVESTMENT CLUB OF FLORIDA  
1039 CORBY COURT  
TALLAHASSEE, FL 32317

SUBJECT: TALLAHASSEE INVESTMENT CLUB OF FLORIDA  
Ref. Number: W05000025555

We have received your document for TALLAHASSEE INVESTMENT CLUB OF FLORIDA and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 305A00036610

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RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Tallahassee Investment Club of Florida,  
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:

1039 CORBY COURT  
TALLAHASSEE, FL  
32317

1039 Corby Court  
Tallahassee, FL  
32317

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

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

CHARLES E. SMITH  
Name

1039 CORBY COURT  
Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE FL 32317  
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..*

Charles E. Smith  
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:**

Jeffery R. Holden  
10741 Downpatrick PL  
Charlotte, NC 28262

(Use attachment if necessary) *see Attached List of members*

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

**REQUIRED SIGNATURE:**

*Charles E. Smith*

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.)

*Charles E. Smith*

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)

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05 JUN 15 PM 12:50  
TALLAHASSEE, FLORIDA

**TICOF**  
**Member Information Listing as of 05/11/05**  
*Confidential - for use by members only*

**Name:** Herschel Clark      **Responsibility:**      **Active:** Yes  
**Address 1:** 7410 Bent Oad Rd      **Address 2:**      **ZIP:** 28226  
**City:** Charlotte      **State:** NC      **Country:** US  
**Contact:**      **Home phone:** 704-543-4205      **Work phone:** 704-905-5464  
   **Fax:** 704-542-7203      **E-mail:** hrobc@aol.com

**Name:** Arthur J Collier      **Responsibility:** 2nd Vice      **Active:** Yes  
   President      **Address 2:**      **ZIP:** 23059  
**Address 1:** 5800 Hardwick Dr      **State:** VA      **Country:** US  
**City:** Glen Allen      **Home phone:** 804-360-1455      **Work phone:** 804-935-6928  
**Contact:**      **Fax:** C-804-564-4198      **E-mail:** acol9585@aol.com

**Name:** Gina Henderson      **Responsibility:**      **Active:** Yes  
**Address 1:** 1814 Raa Ave      **Address 2:**      **ZIP:** 32303  
**City:** Tallahassee      **State:** FL      **Country:** US  
**Contact:**      **Home phone:** 850-386-7515      **Work phone:** 850-201-8289  
   **Fax:** C-850-445-8589      **E-mail:** glhenderson9@earthlink.net

**Name:** Jeffery R Holden      **Responsibility:** President      **Active:** Yes  
**Address 1:** 10741      **Address 2:**      **ZIP:** 28262  
Downpatrick PL      **State:** NC      **Country:** US  
**City:** Charlotte      **Home phone:** 704-548-1159      **Work phone:** 704-965-2678  
**Contact:**      **Fax:** 704-717-9265      **E-mail:** Bassicu@Yahoo.com

**Name:** John H Holden      **Responsibility:** Chaplan      **Active:** Yes  
**Address 1:** 182 Hazelwood Rd      **Address 2:**      **ZIP:** 32310  
**City:** Tallahassee      **State:** FL      **Country:** US  
**Contact:**      **Home phone:** 850-671-3028      **Work phone:** 850-212-3346  
   **Fax:**      **E-mail:**

**Name:** Godfrey Lee      **Responsibility:** Vice President      **Active:** Yes  
**Address 1:** 350 Bristol ST      **Address 2:**      **ZIP:** 06708  
Unit C5      **State:** CT      **Country:** US  
**City:** Waterbury      **Home phone:** 203-597-0772      **Work phone:**  
**Contact:**

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**Fax:**

**E-mail:** glbugir@aol.com

**Name:** Charles E Smith

**Address 1:** 1039 Corby Court

**City:** Tallahassee

**Contact:**

**Responsibility:** Educational  
Coord

**Address 2:**

**State:** FL

**Home phone:** 850-656-5553

**Fax:** C-850-980-3878

**Active:** Yes

**ZIP:** 32311

**Country:** US

**Work phone:** 850-891-5815

**E-mail:** smithcha@talgov.com

**Name:** Ira P Walker

**Address 1:** 2788 Faringdon Dr

**City:** Tallahassee

**Contact:**

**Responsibility:** Historian

**Address 2:**

**State:** FL

**Home phone:** 850-562-1440

**Fax:** C-850-879-0556

**Active:** Yes

**ZIP:** 32303

**Country:** US

**Work phone:** 850-668-3282

**E-mail:**  
iwalker@datasctready.com

**Name:** Gino E Warner

**Address 1:** 7188 Waters Edge  
Dr

**City:** Stone Mountain

**Contact:**

**Responsibility:** Secretary

**Address 2:**

**State:** GA

**Home phone:** 770-498-7767

**Fax:** 404-325-8104

**Active:** Yes

**ZIP:** 30088

**Country:** US

**Work phone:** 404-325-2144

**E-mail:** ginool@aol.com

**Name:** Victoria E Warner

**Address 1:** 2604 Pottsdamer St

**City:** Tallahassee

**Contact:**

**Responsibility:** Financial  
Officer

**Address 2:**

**State:** FL

**Home phone:** 850-576-3965

**Fax:** D-386-252-0810

**Active:** Yes

**ZIP:** 32310

**Country:** US

**Work phone:**  
C-850-591-3411

**E-mail:**

05 JUN 15 PM 12:50  
FALLAHASSEE, FLORIDA

Print date: 05/11/05