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TRANSMITTAL LETTER

Registration Section

TO:

| Division of Corporations |
|---|
| SUBJECT: T-Roy d Son LLC (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: |
| Troy Tyre (Name of Person) |
| T-Roy a Son (Firm/Company) |
| 119.1 Houston Ave (Address) |
| Live Oak Fla. 32064 (City/State and Zip Code) For further information concerning this matter, please call: |
| For further information concerning this matter, please call: at (|
| (Name of Person) at () Simple Telephone Number) |
| Enclosed is a check for the following amount: |
| ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) |
| STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations |

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

| T-Roy & Son 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: |
|--|---------------------------------------|---|
| ARTICLE II - Address: | The mailing address and street addres | is of the principal office of the Limited Liability Company is: |
| T-Roy a Son LLC | | |
| | T- Roy a Son | LLC |
| | The name of the Limited Liability Co | and a control in a |

ARTICLE I - Name:

| 1191 Houston Ave 1121 Houston Ave Live Oak Fla. Live Oak Fla. | Principal Office Address: | Maining Address: |
|--|-----------------------------------|--|
| | 1191 Houston Ave Live Oak Fla. | 1121 Houston Ave Live Oak Fla. 32064 |

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

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

Tray Tyre

Name

1121 Hous for Aue

Florida street address (P.O. Box NOT acceptable)

City, State, and Zip

The registered agent are:

OS

AND

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

(CONTINUED)

| MSIRM | Troy Tyre 1121 Houston Aue Live Oak Fla. 39.064 | |
|-------------------------------------|---|---------|
| | | |
| | | |
| | | |
| (Use attachment if necessary) | IALL 05. | |
| NOTE: An additional article must be | added if an effective date is requested SS | 19 12 E |
| REQUIRED SIGNATURE: | TT] | |
| 1, 1 | E PH | |

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

Typed or printed name of signee

Name and Address:

Filing Fees:

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

that the facts stated herein are true.)

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

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

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