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Account Name : BUSINESS FILINGS  
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**LIMITED LIABILITY COMPANY**

**TLD & MJW LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$155.00

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FAX AUDIT # **H05000164913 3**

**ARTICLES OF ORGANIZATION  
OF  
TLD & MJW LLC**

**ARTICLE I            NAME**

The name of the limited liability company shall be: **TLD & MJW LLC**

**ARTICLE II            PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: 366 Grapewood Ct., Marco Island, Florida 34145.

**ARTICLE III            INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: John M. Wrucke, 366 Grapewood Ct., Marco Island, Florida 34145. Located in the County of Collier.


**ARTICLE IV            DURATION**

The duration for the limited liability company shall be: 12/31/2045.

**ARTICLE V            MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

John M. Wrucke, 366 Grapewood Ct., Marco Island, Florida 34145

  
Business Filings Incorporated, Organizer  
Mark Schiff, AVP  
Authorized Representative  
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,  
Madison, WI 53717  
(608) 827-5300

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**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,  
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

The name of the limited liability company is: **TLD & MJW LLC**

The name and address of the registered agent and office is John M. Wrucke, 366  
Grapewood Ct. , Marco Island, Florida 34145. Located in the County of Collier.

Having been named as registered agent and to accept service of process for the above  
stated 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.

Signature: \_\_\_\_\_

  
John M. Wrucke

Date: June 17, 2005

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