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Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

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ARTIC	LES OF ORGANIZATION	
*	FOR	
FLORIDAL	IMITED LIABILITY COMPANY	
ARTICLE I - Name The name of the Limited Liability Company is: ${f T}$]	D Eye LLC	
ARTICLE II - Address The mailing address and street address of the princi	pal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
124 Lakeview Drive	124 Lakeview Drive	
Auburndale, FL 33823	Auburndale, FL 33823	

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature The name and Florida street address of the registered agent are:

Timothy C. Deeds

Name

124 Lakeview Drive

(P.O. Box or Mail Drop Box NOT Acceptable)

Anburndale, FL 33823

(City / State / 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.

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Registered Agent's Signature - Timothy C. Deeds

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

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

<u>Title:</u>

Name and Address:

"MGR" - Manager "MGRM" = Managing Member

MGRM

Timothy C. Deeds- 124 Lakeview Drive, Auburndale, FL 33823

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member or 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.)

Timothy C. Deeds

Typed or printed name of signee

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