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(Requestor's Name)				
(Address)	_			
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Registration Section Division of Corporations The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: SUSAN JUDAH For further information concerning this matter, please call: Enclosed is a check for the following amount: \$160.00 Filing Fee, \$125.00 Filing Fee S130.00 Filing Fee & ☐ \$155.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
TPG Holdings, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is
77 11 4 1 1

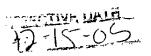
ARTICLE I - Name:

Principal Office A	ddress:	Mailing Address:	
6300 Hui DAVIE F	RON TER	DAVIE FL 33331 PG	*
(The Limited Liability Co business entity with an a	mpany cannot serve as its own Registre Florida registration.) Torida street address of the MARTHA SUS Name	SAN JUDAH BA P	The state of the s
		UTER_ddress (P.O. Box NOT acceptable)	
	DAVIE City, State	FL 3333 s, 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 (REQUIRED)

(CONTINUED) Page 1 of 2



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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRH	Martha Susan Judah 16300 Huron Ter DAVIE FL 33331
MGRH	Helinda J. and Stephen D. Paley 14 Berknap Ra. 14 Kinson, NH 03811
MGRM	Sherrie S. and Arthur L. Gordon 13801 SW 395+ Davie, FL 33330
	2005 D
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: Dec. 15, 2005 (OPTIONAL) To ecific and cannot be more than five business days prior 3: 3: 3:
REQUIRED SIGNATURE	

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.)

SHERRIE S. GORDON

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)