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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

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## LaBarbera and Campbell

Attorneys and Counselors at Law

MICHAEL D. LABARBERA EDWARD S. CAMPBELL, III 1907 WEST KENNEDY BOULEVARD TAMPA, FLORIDA 33606 (813) 251-1940 FAX: (813) 251-3240

January 3, 2006

Secretary of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32316

RE:

Tabarin II, L.L.C.

Dear Sir/Madam:

Enclosed are Articles of Organization regarding the above, together with a check in the sum of \$160.00 to cover the fee for filing, designation of registered agent, certified copy and certificate of status.

Thank you for your attention to this matter. Should you require anything further please do not hesitate to contact me.

Very truly yours,

Pamela Dixon, Legal Assistant to

Michael D. LaBarbera

MLB/pd

cc: Tabarin II, LLC

### TRANSMITTAL LETTER

	stration Section sion of Corporations					
SUBJECT:	Tabarin II, L.L.C.	f Limited Liability Co	ompany)			
The enclosed	Articles of Organization and fee	e(s) are submitted for t	filing.			
	Please return all corre	espondence concernin	g this matter to the following	ng:		
	Michael D. LaBarbera	- <u></u>				
		(Name of Person	n)			
	LaBarbera & Campbell				_	
		(Firm/Company	r)			
1907	West Kennedy Blvd.			TAL SE	200	-
		(Address)		AR	<u></u>	
	Tampa, FL 33606			TARY	JAN -5	-
		(City/State and Zip	Code)	E A	PK	
For further in	formation concerning this matte	r, please call:		STATE	2: 04	
Michael D. I	_aBarbera	at ( 813	251-1940			
	(Name of Person)	(Area	Code & Daytime Telephone N	umber)		,,

STREET ADDRESS:

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

Muhan OSE

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:			
Tabarin II, L.L.C.			
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Li	ability Compan	y is:
Principal Office Address:	Mailing Address:		
3320 West Sevilla Circle	3320 West Sevilla Circle	€	
Tampa, FL 33629	Tampa, FL 33629		
		2016 TALC	
ARTICLE III - Registered Agent, Registered Control of the name and the Florida street address of the registered address of	Office, & Registered Agent's gistered agent are:	JAN #5 PM RETARY OF S AHASSEE, FI	
Michael D. LaBarbera Name		2: 04 DRIE	
1907 West Kennedy Blvd. Florida street address (P.O.	Box NOT acceptable)	·-y •\$#•	
Tampa	FLORIDA 33606		
City, State, an	d 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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

## 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:		
Thomas Benoit, MGR	3320 West Sevilla Circle		
	Tampa, FL 33629		
Chris Anderson, MGR	2625 North Dundee Street		-
	Tampa, FL 33629	•	٠, س
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NOTE: An additional article must be	added if an effective date is requested	$\vec{\wp}$	C)
REQUIRED SIGNATURE:	, O. C.	05	
Makan OC Signature of a member or an au	athorized representative of a member.		n de -
	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury		

#### Filing Fees:

\$100.00 Filing Fee for Articles of Organization

that the facts stated herein are true.)

Michael D. LaBarbera

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee