L06000002743

(Requestor's Name)	
(Address)	
(Address)	—
(City/State/Zip/Phone #)	—
·	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Dusiness Entity Marile)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	\neg
Special mandenons of ming Onice.	
// // //	
	1
	ļ
	ĺ
Office Use Only	

۲,



200062432972

01/10/06--01002--014 **155.00

2006 JAN -9 AM 9: 11

. CAPITAL CONNECTION, INC.

Walk-In

Will Pick Up

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Tan Brothers, Sec		
		Art of Inc. File LTD Partnership File Foreign Corp. File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
	,	Merger File
		Art. of Amend. File
	'	RA Resignation Dissolution / Withdrawal
	,	Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
	1.	Certificate of Status
	-	Certificate of Fictitious Name
		Corp Record Search
	_	Officer Search
	-	Fictitious Search
Signature	-	Fictitious Owner Search
		Vehicle Search
		Driving Record
Requested by:	3:24	UCC 1 or 3 File
Name Date	Time	UCC 11 Search
	i	LICC 11 Retrieval

Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
TAN BROTHERS 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:
Principal Office Address: Mailing Address:
San- 12021 Royce Waterford Circle TAMPA, FL 33626
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Yusut Ahmet Tand SAccarellat
Name Baccatcha
12021 Royce Waterford Circle 4144N.
Florida street address (P.O. Box NOT acceptable) Armoniak
12 mpa, 1 FL 53626 Ste. 20
City, State, and Zip Tampa, Pl
Having been named as registered agent and to accept service of process for the above stated limited 336 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
and provided song among significant and agent and provided you in chapter 600, 1 i.m.
Ti Checker
Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

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)