LD6000104704

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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TANEL 74, GAG Requester's Name	
1413 N. BAOWOUGH St Address	
City/State/Zlp Phone #	386-8420
•	Office Use Only
CORPORATION NAME(S) & DOCUM	Office Use Only MENT NUMBER(S), (if known): ———————————————————————————————————
1. 1712 Tacheco Roto L	SECRE ALLAH
2. 1216 TACNECO ROLD	(Document#) ASSEE 0
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait	Certified Copy Photocopy Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	c:
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The name of the Limited Liability Company is:

1720 TACFECO ROW, LC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1423 N. BAONOGGH ST TANAHASSEE, FL 32303	-5AUE-
TALLAHASSEG, FT 38303	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name

Name

1423 N. Blancusk St

Florida street address (P.O. Box NOT acceptable)

TANAHASSEE FL 32363

City State and Zin

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 Signatur

(CONTINUED)

OGOCT 27 PH 12: 19
SECRETARY OF STATE
ALLAHASSEE, FI OBITA

<u>Title:</u> "MGR" ≈ Manager ×"MGRM" = Managing Member	Name and Address:	
MGRM	JANEE H. GAY 1423 N. SLONOUGH St TALLAHASSEE, FL 32303	
(Use attachment if necessary)		
	must be added if an effective date is requested.	
REQUIRED SIGNATURE:	Janet H. Da.	
of this document of the facts:	e with section 608.408(3), Florida Statutes the execution ent constitutes an affirmation under the penaltics of perjury stated herein are true.) WELL H. GALL Typed or printed name of signce	Manage earl
	Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent	