

106000106496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer

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600080137106

9/18/06

09/26/06--01037--004 **120.00

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606-42472

FILED
06 SEP 26 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2006

DONALD P BEAUCHAINE
1161 SW GARDENA AVE
PORT ST LUCIE, FL 34953

SUBJECT: JJD, LLC
Ref. Number: W06000042471

We have received your document for JJD, LLC and check(s) totaling \$120.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$5.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod
Document Specialist

Letter Number: 506A00057601

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TTD LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald P. Beauchaine
(Name of Person)

1101 SW Gardner Ave
(Firm/Company)
Fort St Lucie, FL 34953
(Address)
(City/State and Zip Code)

For further information concerning this matter, please call:

Carol Wands at 772-878-7664
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (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

ARTICLE I - Name:

The name of the Limited Liability Company is:

JTD, LLC

9/10/06

(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:

1141 SW Gardena Ave
Port St Lucie, FL 34953

1141 SW Gardena Ave
Port St Lucie, FL 34953

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:

Donald P. Beauchaine

Name

1141 SW Gardena Ave

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

Port St Lucie FL 34953

City, State, and Zip

BEAUCHAINE (SP)

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..

Donald P. Beauchaine

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Use attachment if necessary)

- **ARTICLE V:** Effective date, if other than the date of filing: Sept 18 2006 (OPTIONAL)
- (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Donald P. BEAUCHAINE
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)