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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

Fax Number (305) 675-2811

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## TIMOTHY MUMMA LLC

Certificate of Status	0
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## ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

TIMOTHY MUMMA LLC

ARTICLE II: Address

The mailing address and street address of the principal office of the Limited Liability Company is:

2365 FRAZIER ST

PENSACOLA, FL 32514

## ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

A1A REGISTERED AGENT INC.

92 SADBERRY ROAD

**QUINCY FL 32351** 

Having been named as registered agent 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.

A1A REGISTERED AGENT INC. / Registered Agent's Signature

**ARTICLE IV: MANAGEMENT** 

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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**TIMOTHY MUMMA LLC** 

ARTICLE V: MEMBERS (optional)

Managing Member:

**TIMOTHY MUMMA** 

2365 FRAZIER ST

PENSACOLA, FL 32514

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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.)

**TIMOTHY MUMMA** 

Typed or printed name of signee