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(Requestor's Name)		
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Se Division of Co				
SUBJECT: TK Cle	earing, LLC			
		d Liability Company)		
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Kevin. C To	ufford			
-	(Name of Person)		
T K Clearin	ig, LLC			
	((Firm/Company)		DIVI 1200
P.O. Box 5	5957			DIVISION OF CO. TO SETTION 2006 NOY - 9 AM 10: 51
 		(Address)		or - 9
Hudson, F	L 34667			9 _. ;.
		/State and Zip Code)		골 중
				AN 10: 54
For further information	concerning this matter, please	call:		
Kevin. C Tufford		ሣሪ _መ , 727 \ 919-497	17 7	
(Name	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for	or 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 Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2006

KEVIN C. TUFFORD P.O. BOX 5957 HUDSON, FL 34667

SUBJECT: T K CLEANING, LLC Ref. Number: W06000049483

2006 NOV - 9 BM 10: 51.

We have received your document for T K CLEANING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on November 9, 2006. Please amend your document accordingly.

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) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 506A00066393

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

T K Clearing, LLC		
(Must end with the words "Limited Liability Com	pany, "Limited Company" or their abbreviation "LLC," or "	"L.C.,")
ARTICLE II - Address: The mailing address and street addres Principal Office Address:	s of the principal office of the Limited Liabili <u>Mailing Address:</u>	ity Company is:
Kevin. C Tufford	Kevin. C Tufford	
12824 Turnstone Ct.	12824 Turnstone Ct.	
Hudson, FL 34669	Hudson, FL 34667	
The name and the Florida street address of the registered agent are: Thomas A Edelman Name		2006 NOV - 9
	idae Rivd	35 5
12320 Shadow R		
	da street address (P.O. Box NOT acceptable)	T S
		H10: 5
Florid Hudson, FL 34669		AM 10: 54

(CONTINUED)
Page1of2

11-200

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:	
MGRM	Kevin. C Tufford	
	12824 Turnstone Ct.	
	Hudson, FL 34669	
MGRM	Thomas A Edelman	(T)
	12320 Shadow Ridge Blvd.	
	Hudson, FL 34669	OLVISII NI OV
MGR	Richard H Richard	
	12638 Buckhorn Dr.	
	Hudson, FL 34669	
		5
		र्रे.

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: NOV 2, 2000. (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.)

Signature of a member of 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.)

Kevin. C Tufford

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)