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SECRETARY OF STATE

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104-113668

COVER LETTER

TO: Registration Solution of Co			o	
SUBJECT:	Tahn (Name of Limite	Holdings, LLC ed Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
	Carl	(Name of Person)		
	. ((Name of Person)		
	TAhn Holdin	us, UC		
		(Firm/Company)		
	2140 sykus	eruk Or		
	,	(Address)		
	Merritt Islan	v/State and Zip Code)		
	(City	//State and Zip Code)	20 TAL	
For further information	concerning this matter, please	call:	O6 NO	# Ser
0		22.120.142	V 27	
CAPL Ah	of Person)	at (321) 412- (Area Code & Daytime T	elephone Number)	ŗ
Enclosed is a check for	or the following amount:	at (<u>321) 412-</u> (Area Code & Daytime T	2006 NOV 27 PM 1: 0 SECRETARY OF STATE ALLAHASSEE FLORID	g miles
	\$130.00 Filing Fee & Certificate of Status		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section	Street/Courier Address Registration Section	<u>58</u>	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

:
ed Company" or their abbreviation "LLC," or "L.C.,")
principal office of the Limited Liability Company is:
Mailing Address:
2140 Sykes Creek DR. 55 Merritt Island, FL. 32955
d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or amothers registered agent are: SET OF STARY OF STAR

egistered 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 Signature (REQUIRED)

(CONTINUED) Page 1 of 2

LFFECTIVE DATE

<u>Title:</u> "MGR" = M: "MGRM" =	anager Managing Member Tala n M <i>G</i> R	Name and Address: CARL TAHN 2140 SYKES Creek DR Merritt Island, FL, 329	
		merritt Island, FL, 329	. 55 ° - -
ARTICLE V: Effect	ent if necessary) tive date, if other than the o	date of filing: 12-01-2006 (OPTIO	NAL)
(If an effective date i to or 90 days after th	s listed, the date must be ne date of filing.)	specific and cannot be more than five bustless	days prior
REQUIRED	SIGNATURE:		
	(In accordance with sect of this document constituted that the facts stated he	or an authorized representative of a member in ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)	0
	CARL TAL Typ	ed or printed name of signee	
Filing 1	Fees:		

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)