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DIVISION OF CORPORATIONS

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Certificates of Status

Certified Copies _

Special Instructions to Filing Officer:

COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: TLC Silf Fence, 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:		
James Luckey (Name of Person)		
The Luckey Law Firm		
P.D. Box 1820	10	S
(Address)	APR	SION
La Delle FL JJIIJ	<u>~</u> _	
(City/State and Zip Code)	ΑH	ORPC RPC
For further information concerning this matter, please call:	AH 10: 5	STATI
(Name of Person) at (863,675-711) (Area Code & Daytime Telephone Number)	5	ONS.
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	&	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations		

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

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

ARTICLES OF ORGANIZATION OF TLC SILT FENCE, LLC

The undersigned, under the provisions of Chapter 608 of the Florida Statutes (the "Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:

- 1. **<u>NAME</u>**: The name of the limited liability company is TLC Silt Fence, LLC. (hereinafter referred to as the "Company").
- 2. <u>Period of Duration</u>: Unless earlier terminated under the Act or the Operating Agreement, the period of duration of the Company shall be perpetual.
- 3. <u>Purpose</u>: The purpose for which the Company is organized is to engage in any and all business activities permitted by the Act and any other applicable laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

07 APR

- 4. <u>Address of Place Of Business</u>: The mailing address for the Company is Post Office Box 1112, LaBelle, Florida 33935, and the street address of the place of business for the Company is 22045 Pollywog Road Southwest, LaBelle, Florida 33935. These addresses may be changed from time to time as provided in the Operating Agreement.
- <u>Registered Agent</u>: The initial registered agent in Florida for the Company is JAMES O. LUCKEY, ESQ. of the Luckey Law Firm, P.L., and the initial registered office is located at 90 Howe Ave, LaBelle, Florida 33935.
- 6. <u>Capital Contributions</u>: Contributions to the capital of the Company shall be made by the members, in the manner prescribed by the written Operating Agreement made and entered into by the members and which may be amended from time to time in accordance with its terms.
- 7. <u>Members</u>: The Company shall have at least one member and may admit additional members on the prior unanimous written agreement of the then-existing members, or as otherwise provided in the Operating Agreement.
- 8. <u>Continuity of Business</u>: On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or on the occurrence of any other event that terminates the continued membership of a member in the Company, or upon any other event that, under the Act, would result in dissolution of the Company, the business of the Company may be continued and the Company will not be dissolved without the prior written consent of all the remaining members of the Company.

9. Management: The overall management and control of the business and affairs of the Company shall be vested in its members, as provided in these Articles of Organization and section 608.407 of the Act. Any and all action by the Company shall require the vote of members holding a majority interest in the Company. Name: **Position:** Tammy Hicks **MEMBER** 10. Indemnification: Except as expressly provided in the Operating Agreement, the Company shall indemnify any member, manager, or former member or manager to the full extent permitted under the Act. Executed at LaBelle, Florida, on this $\frac{112}{100}$ day of _ 2007. 07 APR 13 AM 10: 5 TLC Silt Fence, LLC a Florida limited liability company By: TAMMY HICKS, Member ,LLC STATE OF FLORIDA COUNTY OF HENDRY The foregoing instrument was acknowledged before me on this _//H_ day of HDril , 2007, by TAMMY HICKS, Member of TLC SILT FENCE, LLC who is personally known to me (______) or produced a Florida Driver's License as identification. (SEAL) Julia Rodriguez-Howard DMMISSION # DD273443 EXPIRES NOTARY PUBLIC - State of Florida January 31, 2008 ONDED THRU TROY FAIN INSURANCE INC.

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REGISTERED AGENT OF TLC SILT FENCE, LLC

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

JAMES O. LUCKEY, ESQ. THE LUCKEY LAW FIRM, P.L. 90 HOWE AVENUE LABELLE, FLORIDA 33935 07 APR 13 AM 10: 5

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..

JAMES O. LUCKEY, ESQ. ATTORNEY AT LAW FL BAR NO.: 26437