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DEPS..... STATE VISIGN OF CORPORATIONS PALLAHASSEE, FLORIDA

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SECRETARY OF STAIL

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
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Requested by:	UCC 1 or 3 File
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ARTICLES OF ORGANIZATION FOR

TIKA PROPERTIES, LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is TIKA PROPERTIES, LLC

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is 3823 E. Tamiami Trail, #186, Naples, FL 34112

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Marc L. Shapiro, Marc L. Shapiro, P.A., 720 Goodlette Rd. N., Ste 304, Naples, FL 34102

ARTICLE IV: MEMBERS

The name and address of the initial Members of the company are:

Tim Casey, Member, 3823 E. Tamiami Trail, #186, Naples, FL 34112 Karen Turville, Member, 3823 E. Tamiami Trail, #186, Naples, FL 34112

The undersigned has executed these Articles of Organization this 9th day of July 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

Authorized Representative

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section the laws of the State of Florida, subagent/registered office, in the State	mits the follow	rida Statutes, the menti ving statement in design	oned company, tating the regis	organized under tered
1. The name of the company is:	Tika	Properties,	LLC	
2. The name and address of the reg	istered agent a	Marc L. 720 Ge	shapire,	ea. Rd. N. Ste30
		1	FL 3410	
HAVING BEEN NAMED AS REG THE ABOVE STATED COMPA HEREBY ACCEPT THE APPOINT CAPACITY. I FURTHER AGRED RELATING TO THE PROPER A FAMILIAR WITH AND ACCEPT?	ny at the Iment as re E to compl ND comple	PLACE DESIGNATE EGISTERED AGENT A Y WITH THE PROV TE PERFORMANCE	D IN THIS C AND AGREE I ISIONS OF A OF MY DUT	ERTIFICATE, I TO ACT IN THIS LL STATUTES IES AND I AM
÷		Mar J.	Shapir	