607000/06405

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

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2007 OCT 19 AM 8: 51 SECRETARY OF STATE TALLAHASSEF, FLORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2007

S.J. MCNEAL 160 VILLAGE BLVD, UNIT A TEQUESTA, FL 33469

SUBJECT: TQS LIMITED LIABILITY COMPANY

Ref. Number: W07000049919

We have received your document for TQS LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P05000076578.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Pursuant to section 608.409(2), F.S., the effective date must be specific, caffnot 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 October 8, 2007. Please amend your document accordingly.

COVER LETTER

TO:

Registration Section

Division of Co	prporations				
SUBJECT: TQS Lis	mited Liability Company	•			
	(Name of Limite	d Liability Compa	any)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing	g.		
Please return all corres	condence concerning this matte	er to the following			
S. J. McNea	ľ				
	(Name of Person)			
TQS Limited	Liability Company				
		Firm/Company)	· · · · · · · · · · · · · · · · · · ·		
160 Village B	Blvd, Unit A				
		(Address)	· · · · · · · · · · · · · · · · · · ·		
Tequesta, Flo	orida 33469				
	(City	State and Zip Code)		
For further information	concerning this matter, please	call:			
Sandra J. McNeal		at (561	248-2392		
(Name	of Person)	(Area Code	& Daytime Te	lephone Number)	
Enclosed is a check for	or the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 File Certified Copy (additional copy is	,	\$160.00 Filing I Certificate of Status Certified Copy (additional copy is enclo	&
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Books 2661 Execution 1	of Corporation	OCT I	E

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:		
TQS HOLDINGS, LLC			
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
S.J. McNeal	160 Village Blvd, Unit A		
	Jupiter, Florida 33469		
The name and the Florida street address of S. J. McNeal	the registered agent are:		
	est address (D.O. Poy NOT accontable)		
Florida street address (P.O. Box NOT acceptable) 160 Village Blvd, Unit A, Jupiter, FL 33469			
City, S	State, and Zip		
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and comple	and to accept service of process for the above stated limited and in this certificate, I hereby accept the appointment as spacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and a registered agent as provided for in Chapter 608, F.S.		
Registered Agent's	Signature (REQUIRED)		
	LORA 88 C		

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:
MGR	S.J. McNeal 160 Village Blvd, Unit A Jupiter, FL 33469

(Use attachment if necessary)

. (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (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.)

REQUIRED SIGNATURE:

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.)

S. J. McNeal

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)