

LOG0000033892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

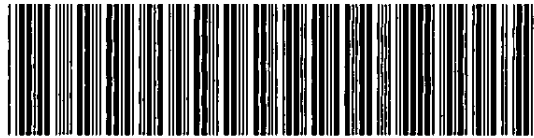
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Office:

JAX
Mr. Trulock GAVE
AUTHORIZATION BY PHONE TO
CORRECT **name + MBRM**
DATE **4/3/88**
BY EXAM **Curt**

Office Use Only



300120007063

03/14/08--01042--004 **125.00

Effective Date

3/10/08

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR 14 PM 4:21

W08-13945

B. Tadlock APR 03 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T + S Property Tax, 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:

Robert Todd Trulock
(Name of Person)

T + S Property Tax, LLC
(Firm/Company)

P.O. Box 600980
(Address)

Jacksonville, FL 32260
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Todd Trulock at (904) 334-2841
(Name of Person) (Area Code & Daytime Telephone Number)

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 & Certified Copy (additional copy is enclosed)

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 17, 2008

ROBERT TODD TRULOCK
PO BOX 600980
JACKSONVILLE, FL 32260

SUBJECT: T AND S PROPERTY, LLC
Ref. Number: W08000013945

We have received your document for T AND S PROPERTY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This name is already on file. (see printout)

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 608A00016007

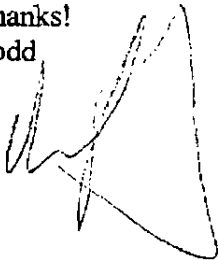
FAX TRANSMITTAL

Fax to: FI Department of State
Phone #: 850-245-6052
Fax #: 850-245-6030
Subject: W08000013945, T and S Property, llc
Date: March 31, 2008
Pages: (Including this sheet), 5

Comments:
Attention: Brenda

Per our discussion earlier today, this is our consent and request for a similar name for a new llc. My wife and I (Todd & Shelley Trulock) own an existing company "T & S Property, llc" and for business reasons would like a new company named "T and S Property, llc" as requested on the attached forms. We are the same people that own both companies and understand the names are similar but the companies are distince and different. This is our desire.

Thanks!
Todd



From the desk of...

Robert Todd Trulock
Managing Member
T & S Property, llc
P.O. Box 600980
Jacksonville, FL 32260
(904) 334-2841
RECrazyjax@yahoo.com

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

I or S Property Tax LLC
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1000 Durbin PK. Dr.
JACKSONVILLE, FL 32259

Mailing Address:

P.O. Box 600980
JACKSONVILLE, FL 32260

Effective Date 3/10/08

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

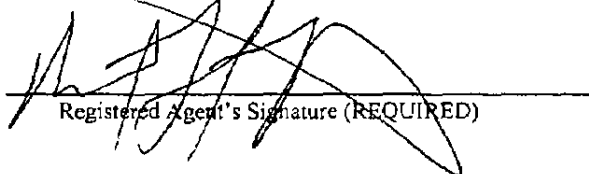
Robert Topp Trulock
Name

1000 Durbin PK. Dr
Florida street address (P.O. Box **NOT** acceptable)

JACKSONVILLE FL 32259
City, State, and Zip

08 MAR 14 PM 4:21
F.L.L.C.
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Name and Address:

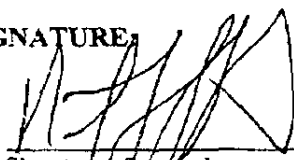
Robert Todd Trulock and
Shelley Faye Trulock as joint tenants
by entirety

P.O. Box 600980
Jacksonville, FL 32260

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3/10/08 (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.)

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.)

Robert Todd Trulock

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)