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TALLAHASSEE, FLORIDA  
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08 AUG 28 PM 4:45 08 AUG 28 PM 2:45

Office Use Only

B. KOHR

AUG 28 2008

## EXAMINER

**CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173**

**FILING COVER SHEET  
ACCT. #FCA-14**

**CONTACT:** RICKY SOTO

**DATE:** 08/28/2008

**REF. #:** 001260.91567

**CORP. NAME:** JUSTIN M TUTTLE, LLC

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION       ARTICLES OF AMENDMENT       ARTICLES OF DISSOLUTION  
 ANNUAL REPORT       TRADEMARK/SERVICE MARK       FICTITIOUS NAME  
 FOREIGN QUALIFICATION       LIMITED PARTNERSHIP      (XX) LIMITED LIABILITY  
 REINSTATEMENT       MERGER       WITHDRAWAL  
 CERTIFICATE OF CANCELLATION  
 OTHER:

**STATE FEES PREPAID WITH CHECK# 58045 FOR \$ 125.00**

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

**COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

CERTIFIED COPY       CERTIFICATE OF GOOD STANDING       PLAIN STAMPED COPY

CERTIFICATE OF STATUS

### Examiner's Initials

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

JUSTIN M TUTTLE, LLC

## ARTICLE II - Address:

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

**Principal Office Address:**

**Mailing Address:**

500 110 AVE NORTHAPT 801

500 110 AVE NORTHAPT 801

ST. PETERSBURG, FL 33716

ST. PETERSBURG, FL 33716

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

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

JUSTIN M TUTTLE

Name \_\_\_\_\_

500 110 AVE NORTHAPT 801

Florida street address (P.O. Box **NOT** acceptable)

ST. PETERSBURG, FL 33716

**City, State, and Zip**

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S. W. 1/4  
TALLAHASSEE, FLORIDA

*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, Florida Statutes..*

**Registered Agent's Signature**

**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:**

JUSTIN M TUTTLE

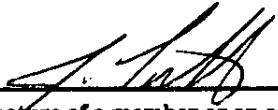
500 110 AVE NORTHAFT 801

ST. PETERSBURG, FL 33716

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**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.)

JUSTIN M TUTTLE

Typed or printed name of signee

**Filing Fees:**

**\$100.00 Filing Fee for Articles of Organization**

**\$ 25.00 Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**