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(Ré	equestor's Name)	
(Ac	ddress)	149614
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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EXAMINER

COVER LETTER

TO:	Registration Division of C			
SUBJI	ECT: Today	Properties LLC.		
		(Name of Limite	ed Liability Company)	
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this matt	ter to the following:	
	Jean Nag	le		
			(Name of Person)	
		······································	(Firm/Company)	
	10662 Pa	elican Preserve Blv	d #201	
	100021	Jiloan i robolivo Div	(Address)	
	Fort Myo	El 22042		
	Fort Mye		ry/State and Zip Code)	
		(6	y blade and disp access	
For fu	rther information	n concerning this matter, please	e call:	
.lav	Hearst		818 914-6122 =	
- uy		ne of Person)	_at (818) 914-6122 (Area Code & Daytime Telephone Number) CREEN NOV	
			CRE NO)() <u></u>
Enclo	sed is a check	for the following amount:	TAR. ASS	emeans countries
\$125	.00 Filing Fee	✓ \$130,00 Filing Fee &	\$155.00 Filing Fee & \$160.00 Filing Fee,	
		Certificate of Status	Certified Copy (additional copy is enclosed) Certified Copy Certified Copy Certified Copy	-
			(additional copy is enclosed)	
		Mailing Address	Street/Courier Address	
		Registration Section	Registration Section	
		Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
		Tallahassee, FL 32314	2661 Executive Center Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Today Proportion LLC	
Today Properties LLC. (Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10662 Pelican Preserve Blvd #201	10662 Pelican Preserve Blvd #201
Fort Myers, FL 33913	Fort Myers, FL 33913
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the I	·
Jean Nagle	**************************************
Name	
10662 Pelican Prese	erve Blvd #201
Florida street add	lress (P.O. Box <u>NOT</u> acceptable)
Fort Myers, 33913	FL.
City, State,	and Zip
	accept service of process for the above stated limited this certificate, I hereby accept the appointment as
	y. I further agree to comply with the provisions of all
statutes relating to the proper and complete pe	erformance of my duties, and I am familiar with and
accept the obligations of my position as regi	stered agent as provided for in Chapter 808, ES.
-//	
Nearl at	
Registered Agent's Signat	ture (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

Title:		and Address:			
. "MGR" = Mana; "MGRM" = Mar					
Mgrm	Jean N	acie			
		Pelican Preserve Blvd #201			
		yers, FL 33913			
					
Mgm	Jay He	earst			
	Sales 8	Sales & Marketing Professionals			
	23960	Long Valley Drive, Hidden Hills, CA 913	02		
 					
			<u> </u>		
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(Use attachment	if necessary)				
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	date, if other than the date of fili	·	OPTIO!	•	
to or 90 days after the d	•	nd cannot be more than five bu	isiness o	ıays pr	10r
to or 50 days after the d	ace of iming.)				
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REQUIRED SI	GNATURE:		Εğ	AON 8007	
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	(level act		SERY SERY	26	3
	Signature of a member of an auth	orized representative of a member.	im O	=	
	(In accordance with section 608.408	2/2) Florida Statutas the evenution	E.S.	71 :OI MA	No. new
	of this document constitutes an affin	mation under the penalties of perjury		<u></u>	
	that the facts stated herein are tru		RY OF STATE SSEE, FLORIDA	<u>+</u>	
	Jean Nag	le.	T.Fa.		
	Typed or printe	d 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)