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FLORIDA/FOREIGN LIMITED LIABILITY CO.

tltpine llc

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MAR 31 2009

EXAMINER

FAX AUDIT # 4090000740273

**ARTICLES OF ORGANIZATION
OF
tftpine llc**

ARTICLE I NAME

The name of the limited liability company shall be: **tftpine llc**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
13132 Mottled Duck Road, Weeki Wachee, Florida 34614.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Theresa Tyner, 13132 Mottled Duck Road,
Weeki Wachee, Florida 34614. Located in the County of Hernando.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name
address of the member of the Limited Liability Company is:

Theresa Tyner, 13132 Mottled Duck Road, Weeki Wachee, Florida 34614

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Date: March 20, 2009

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717

(608) 827-5300

FAX AUDIT # 4090000740273

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **tltpine llc**

The name and address of the registered agent and office is Theresa Tyner, 13132 Mottled Duck Road, Weeki Wachee, Florida 34614. Located in the County of Hernando.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: Theresa Tyner
Theresa Tyner

Date: 3-24-09

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