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(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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EXAMER

COVER LETTER

SUBJECT:	Retai	Envi	ronmer	nts LLC		
	Name of Limi	ed Liab	ility Compa	any		
The enclosed Article	s of Organization and fee(s) are	submitt	ed for filing	g.		
Please return all corre	espondence concerning this mat	ter to th	e following	;;		
	N		I R. Tye			
		Name o	of Person			
	SHO		C / c/o T	ye		
		Firm/C	Company			
		PO Bo	x 129			·
		Ade	dress			
	Sara	sota F	lorida 34	230		
	Ci	ty/State a	ınd Zip Code)		
	mtar E-mail address: (to be used	ch02@	yahoo.d	com		
E 6 the form and			annuar repe	ar nouncumon,		98
ror luttier informatio	on concerning this matter, pleas	e can.				
	chael R. Tye	at (941		06-2973	
Nai	ne of Person		Area Code	& Daytime Tele	phone Number	77 P
Enclosed is a check	for the following amount:					
\$125.00 Filing Fed	e \$\int\\$130.00 \text{ Filing Fee & Certificate of Status}	Ce	55.00 Filin rtified Cop ditional cop		Certified C	of Status &
n de la composition della comp	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registrati Division Clifton B 2661 Exc	ourier Address on Section of Corporations suilding ecutive Center Ones, FL 32301		

CAN THE REAL MANNEY WERE STORED TO THE WAR AS A STORED OF THE PROPERTY OF THE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Lin	mited Liability Company is:				
(Mus	Retail Environm				
ARTICLE II - Add		,, , , ,			
The mailing address	s and street address of the pri	incipal office of the Limited Lia	ability Cor	npany	is:
Principal Office Address:		Mailing Address:			
3165 Founders Club Dr.		PO Box 129			
Sarasota Florida 3	34240	Sarasota Florida 34230			
(The Limited Liability Cor		Office, & Registered Agent's ered Agent. You must designate an indivi-			, m
The name and the F	lorida street address of the re	egistered agent are:		26	1
	Michael F	R. Tye	5 mil 5 mil	굕	F
	Name		골 모드	.;; - ₇ -	-
	3165 Founder	s Club Dr.		2	
-	Florida street address (P.O.	Box NOT acceptable)			
	Sarasota Florida 34240	FL			
	City, State, an	nd Zip			

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 (REOUIRED

(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:

<u>Title:</u> "MGR" = Manag "MGRM" = Mar				
MGR	Barbara W. Tye 3165 Founders Club Dr. Sarasota Florida 34240			
MGRM	Michael R. Tye 3165 Founders Club Dr. Sarasota Florida 34240			
(Use attachment	• /		7 A Y \	
RTICLE V: Effective If an effective date is list or 90 days after the date of REQUIRED SI	<u>. </u>	SPTION Siness d	≀AL) ays pri	ior
KEÇÜKED SI	Signature of a member or an authorized representative of a member.	TALL AND T	2009 OCT	4 - Lan () 7 G Mg 23 - 17. 24 - 24. 25 - 24.
	(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.) Michael R. Tye Typed or printed name of signee		26 PM 2:	growing and the second of the
Filing Fees		And the same	21	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)