

L10000056183

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000122985 3)))



H100001229853ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jdavis@johndavispa.com

FLORIDA LIMITED LIABILITY CO.
Toodle-pip Properties LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED

10 MAY 25 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 24 PM 7:41

T. HAMPTON

MAY 26 2010

EXAMINER

MAY-25-2010 11:06

000-017-0001

P.02



May 25, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BUSINESS FILINGS

SUBJECT: TOODLE-PIP PROPERTIES LLC
REF: W10000025256

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H10000122985
Letter Number: 110A00013097

FAX AUDIT # H100001229853

**ARTICLES OF ORGANIZATION
OF
Toodle-pip Properties LLC**

ARTICLE I NAME

The name of the limited liability company shall be: Toodle-pip Properties LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
28901 Trails Edge Blvd Ste. 205, Bonita Springs, Florida 34134.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: John Davis, 28901 Trails Edge Blvd Ste 205,
Bonita Springs, Florida 34134. Located in the County of Lee.


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 Managers and the name and
address of the manager of the Limited Liability Company is:

Trevor John Pumphrey, 602 105th Avenue, Naples, Florida 34108


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

Date: May 18, 2010

FAX AUDIT # H100001229853

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 24 PM 7:42

FAX AUDIT # H10000122985 3

**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: Toodle-pip Properties LLC

The name and address of the registered agent and office is John Davis, 28901 Trails Edge Blvd Ste 205, Bonita Springs, Florida 34134. Located in the County of Lee.

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: _____

John Davis

Date: 5/20/10

FAX AUDIT # H10000122985 3

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 24 PM 7:42