"L11000030200

(Requestor's Name)
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SECRETARY OF STATE

W11-11688

J. BRYAN

MAR 11 2011

EXAMINER

COVER LETTER

	tion Section of Corporations				
SUBJECT: T&					
	Name of Lim	ited Liability Compa	ny		
The enclosed Artic	cles of Organization and fee(s) are	e submitted for filing	, .		
Please return all co	orrespondence concerning this ma	tter to the following	:		
Angela	a Davis or Theresa	McKibben			
-		Name of Person			_
T&A L	LC				
		Firm/Company			_
4221 8	SW 72 Terrace				
		Address		30 3	-
Davie, f	Florida 33314			ECAR	77
		ity/State and Zip Code		TAF	T T T
mckibbe	ent@bellsouth.net E-mail address: (to be used	for future annual reno	rt notification)	SEX -	8 L
For further informa	ation concerning this matter, pleas	·	n nouncation)	FSTAT	1:26
Theresa Mck	libben	_ at (_754)	422-9817	Dr.	U.
	lame of Person	Area Code	& Daytime Telep	hone Number	
Enclosed is a che	ck for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed))
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	rcle	



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 1, 2011

ANGELA DAVIS OR THERESA MCKIBBEN T&A LLC 4221 SW 72 TERRACE DAVIE, FL 33314

SUBJECT: T&A LLC

Ref. Number: W11000011688



We have received your document for T&A LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #L04000012217, T & A, LLC.

Please return your document, along with a copy of this letter, within 60 day your filing will be considered abandoned.

If you have any questions concerning the filing of your document, ple' (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 211/

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Flt

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Con	mpany is:
McKibben and Davis Co	onsulting, L.L.C.
. (Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4221 SW 72 Terrace Davie, FL 33314	4221 SW 72 Terrace Davie, FL 33314

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Theresa	McKibben	ALL C
	Name	H.
4221 5	SW 72 Terrace	ASSER
	Florida street address (P.O. Box NOT acceptable)	,
Davie	_{FL} 33314	5
	City, State, and 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 (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:

ordii Munu	ging Member	
MGR .	_	Angela Davis
•		4221 SW 72 Terrace
		Davie, FL 33314
MGRM	_	Theresa McKibben
	_	4221 SW 72 Terrace
		. <u>Davie, FL 33314</u>
	- `	<u> </u>
	• •	- CC AR
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	necessary)	<u>ar</u>

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Theresa McKibben

Typed or printed 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)