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T. HAMPTON

APR 8 8 2011

EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: TSRD-5 Investments, LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Theodore L. Hagill or Sharan M. Magill Mame of Person
TSRD Investments Firm/Company
4120 Peters Road Address
Address
Plantation Fl. 33317 City/State and Zip Code
DHCG & AOL-COM or SharonMMagill & AOL.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 584-2803 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
■\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
	4120 Peters Road Plantation, FL. 33317

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:

heodore L. Hagill H120 Peters Road

Florida street address (P.O. Box NOT acceptable)

Plantation FL 33317

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Wanager	Theodore L Magill 5170 SW 18 Ct Plantation, Fl. 33317
Manager MGRM	Sharon M Mag: 11 5170 SW 18 C7 Plantation, Fl. 33317 Ryan L. Mag: 11 4511 SW 30 Way Dania Beach, Fl. 33312
MGRM	Derek M. Magill 5021 SW 10 St Plantation, Fl. 33317

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _______ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

Theodore L. Magill
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)

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