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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

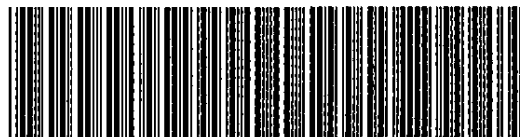
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 JUN 20 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

JUN 21 2011

EXAMINER

ROSPLOCK & PEREZ
ATTORNEYS AND COUNSELORS AT LAW
INTERSTATE SQUARE BUILDING I
4230 STATE ROUTE 306
AT INTERSTATE 90
WILLOUGHBY, OHIO 44094

ROBERT S. ROSPLOCK*
rosplock@rosplockandperez.com
RICHARD J. PEREZ

*ALSO ADMITTED TO PRACTICE IN FLORIDA

TELEPHONE (440) 953-1310
FAX NUMBER (440) 953-1427

June 15, 2011

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

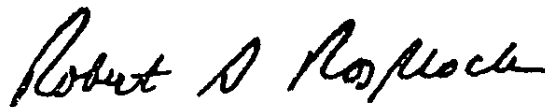
RE: *TCE Fruitville Road, LLC*

Dear Sir or Madam:

Would you please register the enclosed LLC and return the Certificate of Status to me at the above address.

Thank you for your assistance.

Sincerely yours,



Robert S. Rosplock

RSR/III
Enc.
File No. 11-R-248

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TCE Fruitville Road, 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:

Robert S. Rosplock

Name of Person

Rosplock and Perez

Firm/Company

4230 State Route 306, Bldg. 1, Suite 240

Address

Willoughby, Ohio 44094

City/State and Zip Code

rrosplock@rosplockandperez.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert S. Rosplock

Name of Person

at (440)

953-1310 Ext. 211

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TCE Fruitville Road, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

8252 Barton Farm Blvd.
Sarasota, Florida 34240

Mailing Address:

Same

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:

Patrick C. Bernardo

Name

8252 Barton Farm Blvd.

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

Sarasota FL 34240

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.

Patrick C. Bernardo

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Thomas W. Christopher

9033 White Oak Road

Kirtland, Ohio 44094

MGR

Paula A. Christopher

9033 White Oak Road

Kirtland, Ohio 44094

(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. 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.)

Thomas W. Christopher

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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