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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

J. SAULSBERRY EXAMINER

JUL 15 2011

COVER LETTER

TO:	Registration of	on Section f Corporations		
SUBJ	ECT: TIM	BERBAY RENTAL	S, LLC	
		Name of Limite	ed Liability Company	
The er	nclosed Article	es of Organization and fee(s) are s	submitted for filing.	
Please	e return all cor	respondence concerning this matt	er to the following:	
	Richard	d C. Langford		
	TRIONAL	a O. Langiora	Name of Person	
			Firm/Company	28 TA:
	160 E.	Summerlin Street, S	uite 202	SECRETARY
			Address	ASS.
	Bartow, I	Florida 33830		;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
	<u> </u>		/State and Zip Code	AM 9: 36 9F STATE FLORID
				9: 38 STATE LORID
		E-mail address: (to be used for	or future annual report notification)	
For fu	rther informat	ion concerning this matter, please	call:	
Rich	ard C. La	ngford	at (863 ·) 534-1041	
•	Na	me of Person	Area Code & Daytime Telepho	one Number
Enclo	sed is a chect	k for the following amount:		
_		\$130.00 Filing Fee &		6170 00 E.T. E
φ123.00	o rung ree	Certificate of Status		\$160.00 Filing Fee, Certificate of Status &
				Certified Copy (additional copy is enclosed)
			'	(additional copy is enclosed)
		Mailing Address	Street/Courier Address	
		Registration Section Division of Corporations	Registration Section Division of Corporations	
		P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circ	a1a
		rananassee, FL 32314	Tallahassee, FL 32301	cie

ARTICLES OF ORGANIZATION OF TIMBERBAY RENTALS, LLC

ARTICLE I - NAME

The name of the limited liability company is Timberbay Rentals, LLC, ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability

Company is:

Principal Office Address: 12519 Pokey Lane Tampa, Florida 33635

Mailing Address: 12519 Pokey Lane Tampa, Florida 33635 2011 JUL 13 AM 9: 3
SECRETARY OF STATI
TALLAHASSEE, FLORII

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Richard C. Langford 160 East Summerlin Street, Suite 202 Bartow, Florida 33830

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..

Richard C. Langford

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

MGR

David Joseph Clark 12519 Pokey Lane Tampa, Florida 33635

Susan Ann Clark 12519 Pokey Lane Tampa, Florida 33825

REQUIRED SIGNATURE:

(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.)

David Joseph Clark
Typed or printed name of signee