L11000109-182

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
L. SELLERS SEP -7 2011
EXAMINER

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09/06/11--01023--016 **130.00



COVER LETTER

TO: Registration Se Division of Con			
SUBJECT: TMD S	Sportswear		
		ited Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
Tina DiTo	masso		
		Name of Person	
		Firm/Company	
321 NW 3	8th St		
		Address	
Oakland Pa	rk, FL 33309		
		ty/State and Zip Code	
tina@tmdsp	ortswear.com E-mail address: (to be used	for future annual report notification)	
For further information c	oncerning this matter, pleas	•	
Tina DiTomasso		at (954) 2946036	
Name o	f Person	Area Code & Daytime Telep	ohone 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 C	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s:
TMD Sportswear LLC.	
(Must end with the words "Limited Lia	bility 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:	Mailing Address:
321 NW 38th St. Oakland Park, FL 33309	321 NW 38th St. Oakland Park, FL 33309
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.)	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
The name and the Florida street address of the	e registered agent are:
Tina DiTomasso	
321 NW 38th St	
	address (P.O. Box <u>NOT</u> acceptable)
Oakland Park	_{FL} 33309
City,	State, and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of al performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S
Registered Agent's Sign	5 6
(CONTI	NUED)

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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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Laurie Latil, MGR	321 NW 38th St Oakland Park, FL 33309
(Use attachment if necessary)	
TICLE V: Effective date, if other than the an effective date is listed, the date must be or 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days p
REQUIRED SIGNATURE:	i Litt
Signature of a membe	er or an authorized representative of a member.
constitutes an affirmation under I am aware that any false inform	8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
Laurie	Latil
Ту	Latil pped 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)