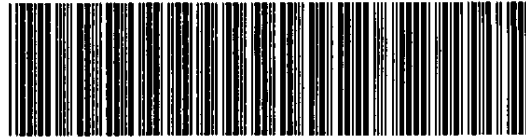


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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Clarence A. Boswell
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Charles E. Bentley
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August 29, 2011

P.O. Drawer 30
Bartow, Florida 33831

245 South Central Avenue
Bartow, Florida 33830
Phone: (863) 533-7117
Fax: (863) 533-7412

Sender's e-mail address:
rich@bosdun.com

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

Re: TGLF Designs, LLC

To Whom It May Concern:

Please find enclosed the Articles of Organization for Florida Limited Liability Company and our firm's check in the amount of \$125.00 for the filing fee.

Please do not hesitate to contact me at the number on this letterhead if you should have any questions.

Sincerely,



Richard A. Lopez

Signed in his absence to avoid delay

RAL/dhc
Enclosure



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 9, 2011

RICHARD A. LOPEZ
P.O. DRAWER 30
BARTOW, FL 33831

SUBJECT: TGLF DESIGNS, LLC
Ref. Number: W11000046719

We have received your document for TGLF DESIGNS, 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):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on September 8, 2011. Please amend your document accordingly.

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

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 111A00020969

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TGLF Designs, 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:

Mailing Address:

1601 N. Central Ave., #504
Flagler Beach, FL 32136

1601 N. Central Ave., #504
Flagler Beach, FL 32136

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:

Lauren Garner

Name

1601 N. Central Ave., #504

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

Flagler Beach, FL 32136 FL

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..

Lauren Garner
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
SEP 22 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Lauren Garner

1601 N. Central Ave., #504

Flagler Beach, FL 32136

MGRM

Gerald Tate Garner

1601 N. Central Ave., #504

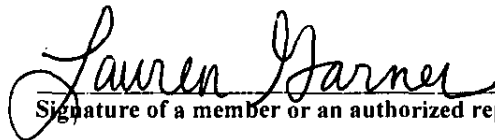
Flagler Beach, FL 32136

(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.)

Lauren Garner

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)