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<i>*</i> .		
	(Requestor's Name)	
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PICK-U	P WAIT MAIL	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of Status	
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Lance Reid

731 Palm St West Palm Beach FL 33401

(561) 371-5936

W I - AON LID

COVER LETTER

:	Division of Corporations	
	SUBJECT: TAL Properties and Investments L.L.C. Name of Limited Liability Company	
s , s	The enclosed Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	Lance Pard Name of Person	
	Name of Person	
· ·	TYL Properties and Investment's LLC. Firm/Company	
*		
	731 Palm St Address	
	Pr. (3)	
	West Palm beach FL 33401	-
	Mr Jance rold E-mail address! (to be used for future annual report notification)	T
	Mr/ance rold Overles com E-mail address (to be used for future annual report notification)	
i.	i i i i i i i i i i i i i i i i i i i	
•	5 . 7 	
	Lance 17e/d at (56/ 37/-5936 Name of Person Area Code & Daytime Telephone Number	
	Name of Person Area Code & Daytime Telephone Number	
	Enclosed is a check for the following amount:	
	\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J4L Properties and Investments L.L.C.

(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:	
731 Palm ST	731 Palm ST	
WPB FL 33401	WPB FL 33401	

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:

Lance Reid	ZOLI SEC ALL	
Name	AHA A	7
731 Palm ST Florida atrast address (B.O. Pay NOT accountable)	-+ BSEE	
Florida street address (P.O. Box NOT acceptable) West Palm Bouk FL 33401	F ST	
City, State, and Zip	ATIC RIDA	

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)

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	Name and Address:
"MGRM" = Managing Member M6R	Lance Red
	731 fulm 51 WPB FL 3340
M6RM	Jorge Marbun 714 North Oct 33460 ==
	REJARY
	OF STATE OF
(Use attachment if necessary)	e date of filing: September 5 work. (OPTIONAL) be specific and cannot be more than five business days

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.)

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)