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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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EFFECTIVE DATE 05-01-12

12 APR 30 PH 3: 24
SELVATIVES FIRMUA

B. BOSTICK

MAY - 1 2012

EXAMINER

COVER LETTER

TO: Registratio Division of	n Section Corporations		
SUBJECT: Tico	Properties, LLC		
		ted Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
Louise	S. Croxford-Kratz		
-		Name of Person	
Tico Pro	operties, LLC	Firm/Company	
4400 50		rim/Company	
1496 BI	ue Spruce Lane	Address	No. of Mary disposition and the second to
		/ Tadio.is	
Wantagh,	, NY 11793	y/State and Zip Code	
lcroxford@	ည်yahoo.com	y/state and hip code	12 /
		for future annual report notification)	
For further information	on concerning this matter, please		30
Louise S. Crox	ford-Kratz	at (516) - 1851-6660	30 PH 3: 24 SSEE, FLORID One Number
Nan	ne of Person	Area Code & Daytime Telepho	one Number S 2
Enclosed is a check	for the following amount:		P
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	1160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
gradictive it yourself	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		le
Secretary of the first	padap formasi no palases a Justifica Cauda	er, fraut annual report nebricalista.	
•	•	productions	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Limit	-	ty Company is:			
Tico Propertie	<u>`</u>	ords "Limited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Addr	ess:	ddress of the principal office of the Limited Lia	ıbility C	Compa	any is:
Principal Office Add	lress:	Mailing Address:			
6474 Windsong Lane Stuart, FL 34997	·	1496 Blue Spruce Lane Wantagh, NY 11793			
	any cannot ser	ent, Registered Office, & Registered Agent's ve as its own Registered Agent. You must designate an individual stration.)			
The name and the Flo	rida street a	address of the registered agent are:	Fice		
L	ouise S. (Croxford-Kratz		12 APR 30	
		Name		7	77
64	474 Wi	ndsong Lane	 	30	ľ.
		Florida street address (P.O. Box NOT acceptable)		<u></u>) i g
St	uart	3/1007	r-'c';	دى	

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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	
MGR	Louise S. Croxford-Kratz
	1496 Blue Spruce Lane
	Wantagh, NY 11793
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	Em P
(Use attachment if necessary)	·
LE V: Effective date, if other than the	ne date of filing: 5/1/12 (OPTIO
	be specific and cannot be more than five business
ffective date is listed, the date must days after the date of filing.)	

(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.)

Signature of a member or an authorized representative of a member.

Louise S. Croxford-Kratz

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)