# L1200086358

(Re	questor's Name)		
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PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			

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06/21/12--01015--018 \*\*51.25

05/10/12--01007--022 \*\*78.75

FILED
2 JUN 21 PH 3: 29
ECKHASSEE, FLORIDA

J. BRYAN

JUL - 2 2012

**EXAMINER** 

FF \$125 005 5



# FLORIDA DEPARTMENT OF STATE Division of Corporations

May 29, 2012

TD 55MPH LLC 2ND MAILING ANTHONY J DUDLEY. SOLE MBR POST OFFICE BOX 700204 WABASSO, FL 32970

SUBJECT: TD 55MPH LLC Ref. Number: W12000026089



We have received your document for TD 55MPH LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There will be a balance of \$51.25 due to file the LLC and receive a COS.

Please return the corrected original and one copy of 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) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 812A00014012

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: TD 55mph LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Anthony J. Dudley  Name of Person  TD 55mph LLC
Anthony J. Dudley
Name of Person
TD 55mph LLC
Firm/Company
6001 N A1A
Address
Vero Beach, FL. 32963
City/State and Zip Code
dudleyaj1@aol.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Anthony J. Dudley at ( 772 ) 473-7879
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration Section

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR	LLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Compan	y is:		
TD 55mph LLC			
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LL.C.")		
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
6001 N. A1A Vero Beach, FL.	P. O. Box 700204 Wabasso, FL		
32963	32970		
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:		
Anthony J. Dudley			

Name

6001 N. A1A

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

Vero Beach FL 32963

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..

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:

Title:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		<del>- 2</del>
MGR	Anthony J. Dudley P. O. Box 700204 Wabasso, FL. 32970	TALLAH
<del></del>	Wabasso, 1 L. 32970	PH 3: 30
		3
<del></del>		
(Use attachment if necessary)		
,	he date of filing:	(OPTIONAL)
effective date is listed, the date must 00 days after the date of filing.)	he date of filing:  be specific and cannot be more than	five business days p
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.)

## Anthony J. Dudley

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)