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S. TONER





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SECRETARY OF STATE
ALL MIASSEE FEBRUARY

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CT & JT RENTALS LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHARLES H TONER Name of Person
Firm/Company
1522 OAK SHORE DRIVE
Address
GULF BREEZE FLORIDA 32563 City/State and Zip Code
C. TONER 152 @ G MAIL COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: 850 - 380 - 0609
CHARLIE OR JOYCE TONER 850 \ 916-7955
Charle or Joyce Toner at (850) 916-7955 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigsim \text{\$130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Conrier Address Registration Section Division of Corporations Clifton Building 2661 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:

CT & JT Renta LS 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 I	Liability Co	mpar	ny is:
Principal Office Address: Mailing Address:	•		
1522 OAK SHORE DR			
FLORIDA 32563			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an industries entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:	至三	8CT	T
Charles H TONER	3365 0 AM	<u></u>	
Name		≩ Ģ	Ö
IS22 OAK Shore DR Florida street address (P.O. Box NOT acceptable)	夏青	ယ္	
Culf BREEZE FL 32563 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..

Charles H Jones
Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
A4 m m	TIMER
MGP	CNARLES H TONCOC
	CHARLES H TONER 1522 OAK SHIRE DR GULF BREEZE, FL 3.
	GUZI BREEZE, FL 8
MGRM	TAVAR TONER
	15 12 DAK SHARE DR
	JOYCE TONER 15 12 OAK SHORE DR CUL + BREEZE, FL 32

(Use attachment if necessary)	
•	
EV: Effective date, if other tha	n the date of filing:
LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.)	n the date of filing: (OPTIO
LE V: Effective date, if other that fective date is listed, the date m	n the date of filing: (OPTIO
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LE V: Effective date, if other that fective date is listed, the date medays after the date of filing.) REOUIRED SIGNATURE: Signature of a median (In accordance with section constitutes an affirmation I am aware that any false)	ust be specific and cannot be more than five business of

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)