#1.12000/46985

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<u>→</u> → #)
PICK-UP	MAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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K. SALY EXAMINER NOV 2 1 2012 (850) 245-6051.

COVER LETTER

TO: Registration Division of C				
SUBJECT:	Tankolo.	y LLC		
	Name of kimi	ted Viability Company		
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Karen	Jersen		
***************************************		Name of Person		
		•		
· · · · · · · · · · · · · · · · · · ·		Firm/Company		
t	500 SW	Nagle Place	<u>-</u>	
		Address	-, 0:	10-0
	tert 3	Saint Lucie	, FL 34	453
	trckjense	ny/state and Zip Code	st.net	
	E-mail address: (to be used	for future annual report notification)		
For further information	concerning this matter, please	call:		
Karen	Jensen	at 757, 630	0.7405	
Name	of Person	Area Code & Daytime Telep	phone Number	
Enclosed is a check f	or the following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section	Street/Courier Address Registration 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

ARTICLE I - Name:
The name of the Limited Liability Company is:
Tankology 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:
500 SW Nagle Place 200 SW Nagle Place
500 SW Nagle Place 500 SW Nagle Place
nort St. Lucie FL. port Saint Lucie FL.
24953

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:
The name and the Florida street address of the registered agent are: Name Name
William Jensen
Name
10081 SW Dolce Rel
Florida street address (P.O. Box NOT acceptable)
fort St Water 3486 FL City, State, and Zip
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
$\langle () $
Registered Agent's Signature (REQUIRED)
(QONTINUED)
y,

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	Karen Jersen 500 Sw Noste Place port Saint Liese FL 34953	
(Use attachment if necessary)		
	date of filing: (OPTIONAL) be specific and cannot be more than five business day	
REQUIRED SIGNATURE:	andr	
(In accordance with section 608. constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)	

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)

Typed or printed name of signee