L13000025584

(Re	questor's Name)	
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· PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF SIALENT DIVISION OF CORPORATIONS

C. LEWIS
FEB | 9 2013
EXAMINER

(850) 245-6051. **.

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	TNS Enter	Prises, LLC ed Liability Company	,
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
<u></u>	Terry Sic	Name of Poson	
	TNS Enter	Prises, LLC	
		· ·······	
1/200	"Kedemption	Way	
Pane	na lity, H	Address 32404 y/State and Zip Code	<u>.</u>
	E-mail address: (to be used	Ogmail. Com for future annual report notification)	
For further information	concerning this matter, please	call:	
Terry	5 Idney of Person	at (850) 596 Area Code & Daytime Telep	ohone Number
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ 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



February 5, 2013

TERRY SIDNEY / TNS ENTERPRISES, LLC 11200 REDEMPTION WAY PANAMA CITY, FL 32404

SUBJECT: TNS ENTERPRISES, LLC

Ref. Number: W13000007015

We have received your document for TNS ENTERPRISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6051.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 813A00002788

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: TNS Sidney Ent	ter	priso
(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 C	ompa	any is:
Principal Office Address: Mailing Address:		
11200 Redemption Way Panama Ctz 72 32404 Panama Ctz 72 32404 Panama Ctz 72 32404	<i>4</i> -	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signat (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or and business entity with an active Florida registration.)		ĵ. Viviĝ
The name and the Florida street address of the registered agent are: Terry Sidney Name) FEB -4	FILE ECRETARY SION OF CO
Florida street address (P.O. Box NOT acceptable) Panama Aty FL 32404 City, State, and Zip	AM 8: 26	D OF STATE RPOBATIONS

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

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Sidn horized representa	ative of a member.	
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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)