LH000021380

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Registration Section Division of Corporations	enter .
SUBJECT: Turf Mana	acmont 220
The enclosed Articles of Organization and fee(s) a	are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Alexander	Walters Name of Person
Turf Manage	ment LLC Firm/Company
1528 Southbo	
Alexwetters 50 E-mail address:	City/State and Zip Code (1932 9 Gmail Com (to be used for future annual report notification)
For further information concerning this matter, ple	
Alexander Walters at (Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$125.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 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 Division of Corporations	Street/Courier Address Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Tuck Management 111	•
Turf Management LLC (Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	
Principal Office Address: Mai	iling Address:
1528 South bay Drive OSPRY, FL 34229	1528 South by Drive Osprzy, FZ 34229
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its ow another business entity with an active Florida registrat	vn Registered Agent. You must designate an individual or
The name and the Florida street address of the registered Alexander Nam	1
1528 South). Florida street address (P.O. B	ox <u>NOT</u> acceptable)
OS Drey City	FL 34229 Zip
the place designated in this certificate, I hereby according capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the co	service of process for the above stated limited liability company at ept the appointment as registered agent and agree to act in this is of all statutes relating to the proper and complete performance obligations of my position as registered agent as provided for in apter 605, F.S
Registéred Agent's Sign	nature (REQUIRED)
(CONTIN	(UED)
Page 1 o	

Title: "AMBR" = Authorized Member "MGR" = Manager MGR	Name and Address:	
	Alexander Welfers 1528 Southbay Drive OSPREY, FL 34229	
71		
E V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) E VI: Other provisions, if any.	e of filing: (OPTIONAL) necific and cannot be more than five business days prior to or 90	
ctive date is listed, the date must be sp f filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90	

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)

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