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SECRETARY OF STALE
DIVISION OF CORPORATIONS

APR 15 2014 J. HARRIS

COVER LETTER

TO:	_	ration Section on of Corporation	ons				
SUBJI	ECT:	TDAI, LLC	· · · · · · · · · · · · · · · · · · ·				
		_	nnization and fee ace concerning th		_	:	
	The MP.O. B	. Moore oore Law Firm, ox 746 lle, FL 32588	, P.A.				
Durre	nberger.	T@gmail.com					
Email	address	for future annu	al report notifica	tion		··	
For fu	rther inf	ormation conce	ming this matter	, please call	:		
Bret A	. Moore		at <u>(</u>	850) <u>678-1</u>	121		
Name	of Perso	n	A	Area Code	Daytime Tel	lephone Number	
Enclos	ed is a o	check for the fo	llowing amount:				
	\$125.00		\$130.00	\$155.0) /	c\$160.00 already held	
	Filing	Fee	Filing Fee & Cert of Status	Certif	Fee & ied Copy copy encl.)	Filing Fee & by your office Cert of Status & Certified Copy (add copy encl.)	_



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 2, 2014

JOAN M MAYS THE MOORE LAW FIRM, P.A. 135 E JOHN SIMS PKWY, P.O. BOX 746 NICEVILLE, FL 32588

SUBJECT: TDAI, LLC

Ref. Number: W14000021027

We have received your document for TDAI, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Most financial institutions require the name(s) and address(es) of persons authorized to manage the limited liability company be listed on our records in order for the business entity to open a bank account. Youmay wish to revise your document to include the name, address, and titleof such persons. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 114A00007052

SECRETARY OF STATE DIVISION OF CORPORATIONS

TDAI, LLC

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

TDAI, LLC

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

STREET ADDRESS:

MAILING ADDRESS:

TDAI, LLC 1016 College Blvd. E Niceville, FL 32578

TDAI, LLC 1016 College Blvd. E Niceville, FL 32578

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Thomas E. Durrenberger 1016 College Blvd. E Niceville, FL 32578

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 605, F.S.

Dated this & day of April, 2014.

Article IV - Management

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

AMBR

Thomas E. Durrenberger 1016 College Blvd. E Niceville, FL 32578

ARTICLE V – Duration

This Limited Liability Company shall have a perpetual existence commencing on the filing of the Articles of Organization.

(In accordance with Section 605-0203 (1) (b), 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.)

Dated this day of April, 2014.

Managing Member

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First-that **TDAI**, **LLC**, desiring to organize under the laws of the State of Florida with its principal office in the city of Niceville, Florida, has named **THOMAS E. DURRENBERGER**, located at 1016 College Blvd. E, Niceville, Florida 32578 as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

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 605, F.S.

Dated this St day of April, 2014.

By: Thomas E. Durrenberger

Resident Agent