# Electronic Articles of Organization For Florida Limited Liability Company

L14000068338 FILED 8:00 AM April 28, 2014 Sec. Of State tbrown

#### Article I

The name of the Limited Liability Company is: PATRICK TIPTON'S CABLE INSTALLATION L.L.C.

### **Article II**

The street address of the principal office of the Limited Liability Company is:

5112 GRACEWOOD LN SAINT AUGUSTINE, FL. 32092

The mailing address of the Limited Liability Company is:

5112 GRACEWOOD LN SAINT AUGUSTINE, FL. 32092

## **Article III**

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

PATRICK D TIPTON SR 5112 GRACEWOOD LN SAINT AUGUSTINE, FL. 32092

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.

Registered Agent Signature: PATRICK D. TIPTON SR.

## **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR

PATRICK D TIPTON SR 5112 GRACEWOOD LN

SAINT AUGUSTINE, FL. 32092

Title: AP

PATRICK D TIPTON JR 5112 GRACEWOOD LN

SAINT AUGUSTINE, FL. 32092

Title: AP

MICHELLE N TIPTON 5112 GRACEWOOD LN

SAINT AUGUSTINE, FL. 32092

Signature of member or an authorized representative

Electronic Signature: PATRICK D. TIPTON SR.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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