

L14000186343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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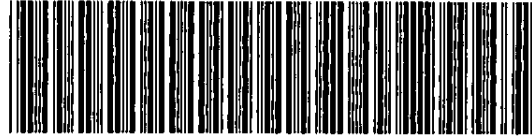
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

TAFUSNAG, L.L.C.

SUBJECT: _____
Name of Limited Liability Corporation

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert H. Grizzard, II

Name of Person: _____

Robert H. Grizzard, II, P.A.

Firm/Company: _____

Post Office Box 992

Address: _____

Lakeland, Florida 33802

City/State and Zip Code: _____

RHGrizzardLaw@ix.netcom.com

Email Address: _____

(To be used for future annual report notification)

For further information concerning this matter, please call

ROBERT H. GRIZZARD, II, P.A. 863-682-8181

RHGrizzardLaw@ix.netcom.com

Enclosed is a check for the following amount:

☒ \$125.00 filing fee

☐ \$155.00 filing fee & Certified copy
copy

☐ \$130.00 filing fee & Certificate of status

☐ \$160.00 filing fee, certificate of status & certified

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TAFUSNAG, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

***5234 Snowy Heron Drive
Lakeland, Florida 33812***

Mailing Address:

***5234 Snowy Heron Drive
Lakeland, Florida 33812***

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 is:

***Richard Lynch
2025 Sylvester Road
Unit K-1
Lakeland, Florida 33803***

Having been named as registered agent and to accept service of process for the above state 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.



Registered Agent's Signature (Required)

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TALLAHASSEE, FLORIDA

ARTICLE IV -

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

Title:

"AMBR" - Authorized Member

"MGR" - Manager

Name and Address:

MGR

**Richard Lynch
2025 Sylvester Road
Unit K-1
Lakeland, Florida 33803**

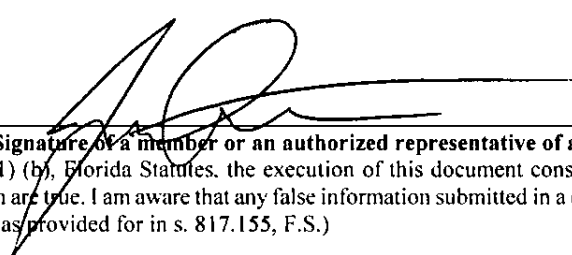
MGR

**Jason Carter
5234 Snowy Heron Drive
Lakeland, Florida 33812**

ARTICLE V: Effective date, if other than the date of filing: _____ (Optional)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing:

ARTICLE VI: Other provisions if any:

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member

(In accordance with Section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that 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.)

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