

**L150002141053ABCT**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H15000214105 3)))



H150002141053ABCT

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : SUPERBIZ.COM, INC.  
Account Number : I20070000160  
Phone : (800)494-3124  
Fax Number : (305)675-2811

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
TESLEE DEVELOPMENT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

**FILED**  
15 SEP -4 AM 9:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 SEP -4 PM 12:07

H15000214105 3

# **ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I      NAME**

The name of the Limited Liability Company is:

TESLEE DEVELOPMENT, LLC

**ARTICLE II      ADDRESS**

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

7254 MINEOLA ROAD

ENGLEWOOD, FLORIDA 34224

**ARTICLE III      PURPOSE**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV      REGISTERED AGENT**

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

KATHLEEN T DEPUGH

7254 MINEOLA ROAD

ENGLEWOOD, FLORIDA 34224

*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.*

x   
KATHLEEN T DEPUGH / Registered Agent's signature

FILED  
SEP-4 AM 9:51  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

H15000214105 3

H15000214105 3

PAGE 2      TESLEE DEVELOPMENT, LLC

**ARTICLE V**

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

AUTHORIZED MEMBER

KATHLEEN T DEPUGH

7254 MINEOLA ROAD

ENGLEWOOD, FLORIDA 34224

AUTHORIZED MEMBER

LEE ANNE KNIGHT

7254 MINEOLA ROAD

ENGLEWOOD, FLORIDA 34224

.....  
X 

KATHLEEN T DEPUGH / Authorized Representative's signature

(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.)

FILED  
15 SEP 14 AM 9:51  
STATE  
TALLAHASSEE  
FLORIDA

H15000214105 3