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(Re	equestor's Name)				
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PICK-UP	WAIT	MAIL			
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(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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# **COVER LETTER**

	lew Filing Section bivision of Corporations					
SUBJECT	Tally Outdoor Rentals					
SUBJECT	Name of Limited Liability Company					
The enclos	sed Articles of Organization and fee(s	s) are submitted	for filing.			
Please retu	urn all correspondence concerning thi	s matter to the f	Collowing:			
	Amanda Turner					
		Name of	Person			
Firm/Company						
	<del></del>					
		ess ::				
	Quincy, FL 32352					
	tallyoutdoorrentals@gmail.com	City/State an	d Zip Code			
	E-mail address: (to be t	used for future a	nnual report notification)			
For further i	nformation concerning this matter, p	lease call:				
	Amanda Turner	850 L(	888-2559			
	Name of Person	Area Code	Daytime Telephone Number			
Enclosed i	s a check for the following amount:					
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	: └─¹Certifi	20 Filing Fee & S160.00 Filing Fee, ced Copy Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Com	pany is:		
Tally Outdoor Rentals LLC			
		Liability Company	, "L.L.C.," or "LLC.")
(Musi contain the	words Ellinted	Elability Company	, E.E.C., of EEC.
ARTICLE II - Address:			
The mailing address and street address	of the principal of	office of the Limited	d Liability Company is:
<u>Principal Offi</u>	ice Address:		Mailing Address:
55 Burnt Pine Trail		55 I	Burnt Pine Trail
Quincy, FL 32352		Qui	ncy, FL 32352
(The Limited Liability Company canno another business entity with an active F	Florida registratio	on.)	You must designate an individual or
The name and the Florida street address	s of the registered	i agent are:	
Ama	anda Turner		
		Name	
<u>55 F</u>	Burnt Pine Trail		
Flo	rida street addres	s (P.O. Box <u>NOT</u> a	acceptable)
<u>Quii</u>	ncy, FL 32352		
	City	State	Zip

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

## ARTICLE IV-

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

	Title:	<b>4</b> 1	Name and Address:	
	"AMBR" = Authorized M "MGR" = Manager	iember		
	MGR		Amanda Turner	
			55 Burnt Pine Trail	<del></del>
			Quincy, FL 32352	<del></del>
	AMBR		Cayden Sheffield	
			55 Burnt Pine Trail	
			Quincy, FL 32352	
				<del></del>
				<del></del>
	(Use attachment if necessa	ary)		
ARTIC	CLEV: Effective date, if other	er than the date of filing:	(OPTION	IAL)
(If an e	ffective date is listed, the da	ate must be specific and	cannot be more than five business days prio	or to or 90 days after
	e of filing.)			
			pplicable statutory filing requirements, this da	te will not be listed as
the doc	cument's effective date on the	ne Department of State's	records.	
ARTIC	CLE VI: Other provisions, if a	any.		
	REQUIRED SIGNATU	RE:		
		-	7,	
			an authorized representative of a member.	Statutes

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Amanda Turner

Typed or printed name of signee

### 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)