# L17000145040

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
. (Bu	isiness Entity Nam	ie)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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17 JUL -5 PH 2: 11
SECRETARY OF STATE
AHASSEF, FLORID.



## FLORIDA DEPARTMENT OF STATE Division of Corporations

17 JUL -5 PM 2: 11
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

June 21, 2017

LARRY M. STEWART, ESQUIRE POST OFFICE BOX 809 STUART, FL 34995-0809

SUBJECT: TKJ ENTERPRISES, LLC

Ref. Number: W17000051331

We have received your document for TKJ ENTERPRISES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is.

L11000059837

Please return your document, along with a copy of this letter, within 60 days or your filed will be considered abandoned.

If you have any questions concerning the filing of your document, please call (859) 245-6052.

Nadira D.Modlees-Sams Regulatory Specialist II

Letter Number: 117A00012551

### **COVER LETTER**

то:	Registration Section Division of Corporations	
SUBJ	ECT: TKJ Enterprises, LLC Name of L	imited Liability Company
The er	nclosed Articles of Organization and fee(s)	
Please	return all correspondence concerning this	matter to the following:
	Larry M. Stewart, Esquire	Name of Person
		Name of Ferson
	Larry M. Stewart, P.A.	
		Firm/Company
	Post Office Box 809	
		Address
	Stuart, FL 34995-0809	0. 0. 17. 0. 1
		City/State and Zip Code
<u>In</u>	ns2ep@bellsouth.net E-mail address: (to be us	sed for future annual report notification)
F C		·
ror iu	rther information concerning this matter, p	ease call:
Larry	M. Stewart, Esquire at	( 772 ) 283-8191
	Name of Person	Area Code Daytime Telephone Number
Enclos	sed is a check for the following amount:	
□ \$125.0	00 Filing Fee   ✓ \$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose
	Mailing Address	Street/Courier Address
	Registration Section	Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		Rentals, LLC
	(Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Add The mailing address		cipal office of the Limited Liability Company is:
Principal Office Ad	dress:	Mailing Address:
5492 SE Nassau Terrace Stuart, FL 34997		5492 SE Nassau Terrace
Stuart, FL 34997  ARTICLE III - Reg The Limited Liabilit another business ent	istered Agent, Registered O by Company cannot serve as it ity with an active Florida regis	Stuart. FL 34997  ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)
Stuart, FL 34997  ARTICLE III - Reg The Limited Liabilit nother business ent	istered Agent, Registered O	Stuart. FL 34997  ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)
RTICLE III - Reg The Limited Liabilit nother business ent	istered Agent, Registered Ony Company cannot serve as it ity with an active Florida reginarida street address of the reginary Timothy R. Jones	Stuart. FL 34997  ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)
Stuart, FL 34997  ARTICLE III - Reg The Limited Liabilit nother business ent	istered Agent, Registered Ony Company cannot serve as it ity with an active Florida reginarida street address of the reginary Timothy R. Jones	Stuart. FL 34997  ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)  stered agent are:
Stuart, FL 34997  ARTICLE III - Reg The Limited Liabilit nother business ent	istered Agent, Registered Ory Company cannot serve as it ity with an active Florida registered at the	Stuart. FL 34997  ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)  stered agent are:
RTICLE III - Reg The Limited Liabilit nother business ent	istered Agent, Registered Ory Company cannot serve as it ity with an active Florida registered as street address of the registered Timothy R. Jones	Stuart. FL 34997  ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or stration.)  stered agent are:

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

17 JUL -5 PM 2: 11

SECREMANSEE FLORIDA

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	_
Timothy R. Jones, as Trustee o	
THE TIMOTHY R. JONES	Stuart, FL 34997
INTERVIVOS DECLARATION	
TRUST dated June 9, 201 Timothy R. Jones, as Trustee of	
THE TIMOTHY R. JONES	Stuart, FL 34997
INTERVIVOS DECLARATION	
TRUST dated June 9, 201	
·	
(Use attachment if necessary)	•
	(0.777.0)[11]
LE V: Effective date, if other than the date of	f filing: (OPTIONAL) ific and cannot be more than five business days prior to or 90 days
of filing.)	me and cannot be more than live business days prior to or 50 days
LE VI: Other provisions, if any.	

(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.)

Timothy R. Jones, as Trustee of THE TIMOTHY R. JONES

Typed or printed name of signee INTERVIVOS DECLARATION:

OF TRUST dated June 9, 2017

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)

# LARRY M. STEWART, P.A., Attorney at Law

73 S.W. Flagler Avenue, Stuart, FL 34994 Post Office Box 809, Stuart, FL 34995 Office (772) 283-8191 Facsimile (772) 283-4396 lms2ep@bellsouth.net

June 29, 2017

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: TKJ ENTERPRISES, LLC/Reference Number: W17000051331

### TO IT MAY CONCERN:

Please find enclosed herewith the <u>corrected</u> Articles of Organization for Florida Limited Liability Company TKJ Enterprises, LLC now to be known as TKJ Rentals, LLC. Additionally enclosed is the letter requesting that it accompany the corrected document back to your office. Please be aware that your office is still in possession of the check totaling \$130.00.

Thank you for your assistance in this matter. If you have any questions, please contact the office.

With Kindest Personal Regards,

LARRY M. STEWART

LMS/It

Enclosures