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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: TR Gandy LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Gandy Name of Person
JR Gandy LLC Firm Company
8527 Belk Drive W
Tauahasee FC 32310 City/State and Zip Code Y Gandy 54 Danal: Con 15-mbil address: (toboused for future annual report notification)
For further information concerning this matter, please call:
James Gendy at (850) 320-5805 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must conatin the words "Limited Liability Com	
CTICLE II - Address: e mailing address and street address of the principal office of the Li	mited Liability Company is:
•	
Principal Office Address:	Mailing Address

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

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

another business entity with an active Florida registration.)

ARTICLE I - Name:

Name

State

Name

State

Name

Name

Name

Notice W

Florida street address (P.O. Box NOT acceptable)

Tollahasser Fr. 32310

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..

Registered Agent's Signature (RtiQUIRED)

(CONTINUED)

20 JAN 23 FN 18 I

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager MGR	James Gandy 8527 Belk Drive W Fallehasser Fr. 323	1_0	- -	
		-	- -	
			- -	
			- - -	
(Use attachment if necessary)				
TLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.)	of filing: (OPTIO) cific and cannot be more than five business days price	or to or 90		
TLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.)	ecific and cannot be more than five business days pri- neet the applicable statutory filing requirements, this days	or to or 90		
TLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.) If the date inserted in this block does not recument's effective date on the Department of	recific and cannot be more than five business days primeet the applicable statutory filing requirements, this days of State's records.	or to or 90		
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