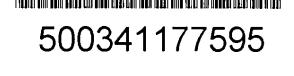
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(Requestor's Name)
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>Timmerman Real Estate_LLC</u> Name of Lir	nited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	atter to the following:	
	Daniel Timmerman	Name of Person	····
	Timmerman Real Estate LLC	FirmvCompany	
	1119 Newcomb Ave	Address	
	Spring Hill, FL 34608	City/State and Zip Code	
<u>d</u> a	annv0568@amail.com	d for future annual report notifica	tion)
For fur	ther information concerning this matter, ple	nse call:	
Danie	Timmerman at (Name of Person	352) 942-9055 Area Code Daytime Tel	lephone Number
Enclos	ed is a check for the following amount:		
I \$1 25.0	00 Filing Fee \$\Bigcup \frac{\mathbf{S}}{\text{130.00}}\text{ Filing Fee & Certificate of Status}	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314	Street/Courier Addi Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Timmerman Real Estate LLC	
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1119 Newcomb Ave	1119 Newcomb Ave Spring Hill, FL 34608
ARTICLE III - Registered Agent, Registered Of The Limited Liability Company cannot serve as it another business entity with an active Florida region The name and the Florida street address of the region Daniel Timmerman	ts own Registered Agent. You must designate an individual or istration.)
	Name
1119 Newcomb Ave	
Florida street address (P.	O. Box NOT acceptable)
Spring Hill	FI, 34608
City	Zip
the place designated in this certificate, I hereby capacity. I further agree to comply with the prov of my duties, and I am familiar with and accept	cept service of process for the above stated limited liability company at accept the appointment as registered agent and agree to act in this usions of all statutes relating to the proper and complete performance the obligations of my position as registered agent as provided for in Chapter 605, F.S
(CON	STINUED)

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Timmerman Real Estate LLC 1119 Newcomb Ave Spring Hill, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of Timmerman Real Estate LLC:

Daniel Timmerman 1119 Newcomb Ave Spring Hill, FL 34608

Daniel Timmerman, Organizer

Date

R" = Authorized Member " = Manager R	Daniel Timmerman 1119 Newcomb Ave Spring Hill, FL 34608 John Timmerman 5551 Baffin Circle Spring Hill, FL 34606
<u> </u>	1119 Newcomb Ave Spring Hill, FL 34608 John Timmerman 5551 Baffin Circle
	1119 Newcomb Ave Spring Hill, FL 34608 John Timmerman 5551 Baffin Circle
R	Spring Hill, FL 34608 John Timmerman 5551 Baffin Circle
R	John Timmerman 5551 Baffin Circle
R	5551 Baffin Circle
	5551 Baffin Circle
	Spring Hill, FL 34606
	
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(ttachment if necessary)	
g.) Other provisions, if any.	
UIRED SIGNATURE:	
	7
MALD SHOW A CORE	/
Signature of a member or (In accordance with section 605.0203 (constitutes an affirmation under the pen	an authorized representative of a member, 1) (b). Florida Statutes, the execution of this document talties of perjury that the facts stated herein are true, abmitted in a document to the Department of State
Signature of a member or (In accordance with section 605.0203 (constitutes an affirmation under the pen	(b), Florida Statutes, the execution of this document lattics of perjury that the facts stated herein are true, abmitted in a document to the Department of State.
Signature of a member or (In accordance with section 605.0203 (constitutes an affirmation under the pen I am aware that any false information seconstitutes a third degree felony as provided in the secons of the second of the secons of the secons of the secons of the secons of the second of the secons of the second of the s	(b), Florida Statutes, the execution of this document lattics of perjury that the facts stated herein are true, abmitted in a document to the Department of State.
Signature of a member or (In accordance with section 605.0203 (constitutes an affirmation under the pen I am aware that any false information as constitutes a third degree felony as provided in the constitutes a factor of the constitutes are the constitutes as	(b), Florida Statutes, the execution of this document lattice of perjury that the facts stated herein are true, abmitted in a document to the Department of State yield for in s.817.155, F.S.) or printed name of signee
Signature of a member or (In accordance with section 605.0203 (constitutes an affirmation under the pen I am aware that any false information as constitutes a third degree felony as provided in the constitutes a factor of the constitutes are the constitutes as	1) (b), Florida Statutes, the execution of this document lalties of perjury that the facts stated herein are true, abmitted in a document to the Department of State yield for in \$.817.155, F.S.) or printed name of signee Filling Fees:

Page 2 of 2