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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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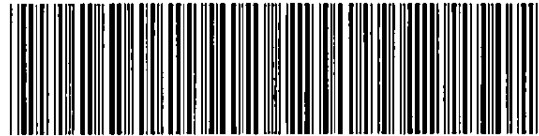
(Business Entity Name)

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TALLAHASSEE, FL

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Attorneys and Counselors at Law  
123 South Calhoun Street  
P.O. Box 391 32302  
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Writer's Direct Line: (850) 425-5457

February 13, 2023

Secretary of State  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**VIA HAND DELIVERY**

Re: **Teresa Tides LLC**

Dear Madam/Sir:

Enclosed are two conformed copies of the Articles of Organization for **Teresa Tides LLC**, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. Also enclosed is our check in the amount of:

☐ \$125.00  
Filing Fee

☐ \$130.00  
Filing Fee &  
Certificate of Status

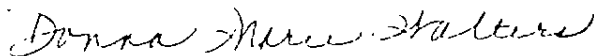
☒ \$155.00  
Filing Fee &  
Certified Copy  
(additional copy enclosed)

☐ \$160.00  
Filing Fee,  
Certified Copy &  
Certificate of Status  
(additional copy enclosed)

Please do not hesitate to call me at (850) 425-5457 if you have any questions. We will have our messenger return to pick up the certified copy.

Thank you in advance for your usual assistance in these matters.

Sincerely,

  
Donna Marie Walters, FRP  
Florida Registered Paralegal

/dmw  
Enclosures

**ARTICLES OF ORGANIZATION  
OF  
TERESA TIDES LLC**

The undersigned, pursuant to the provisions of Chapter 605, Florida Statutes, provides the following information for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE 1.  
Name**

The name of the limited liability company is **Teresa Tides LLC**.

**ARTICLE 2.  
Address**

The street and mailing address of the place of business in Florida is:

2104 Spencer Avenue  
Tallahassee, Florida 32308

**ARTICLE 3.  
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the limited liability company are:

**Virginia Cox**  
2104 Spencer Avenue  
Tallahassee, Florida 32308

*Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.*

s/Virginia Cox  
**Virginia Cox, Registered Agent**

SECRETARY OF STATE  
TALLAHASSEE, FL

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**ARTICLE 4.  
Management**

The limited liability company shall be managed by at least one Manager and is, therefore, a Manager-managed company. The name and address of the person authorized to manage and control the limited liability company as Manager are as follows:

**Virginia Cox, Manager**

2104 Spencer Avenue  
Tallahassee, Florida 32308

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization the 13<sup>th</sup> day of February, 2023.

*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 Section 817.155, F.S.*

s/Robert A. Pierce

**Robert A. Pierce**  
Authorized Representative of Member

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TALLAHASSEE, FL