

L 99000006416

Tuesday, September 28, 1999

Registration Section
Division of Corporation
Post Office Box 6327
Tallahassee FL 32314

DeaSir/Madame,

Per your request, this letter contains my full name, address and daytime telephone number.
I have also attached a check for \$285.00 for the filing fees.

Lawrence V. Fournillier
11595 Turnstone Drive
Wellington, Florida 33414
(561) 791-0292 daytime telephone #

Sincerely,



Lawrence V. Fournillier

Attachment:

400003001784--8
-09/30/99--01064--011
****285.00 ****285.00

FILED
59 SEP 30 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TTOnline.com LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

11595 TURNSTONE DRIVE WELLINGTON, FLORIDA 33414

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

30 years or to the maximum extent permitted by law, whichever is greater.

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

LAWRENCE V. FOURNILLIER
11595 TURNSTONE DRIVE
WELLINGTON, FLORIDA 33414

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

THE MEMBERS MAY ADMIT ADDITIONAL MEMBERS BY A MAJORITY VOTE OF THE ENTIRE MEMBERSHIP.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

continued by the consent of all of the remaining Members under a right to do so stated in the Articles of Organization of the Company within ninety days after termination.

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of TTONLINE.COM LLC
_____ certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 285.00 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ _____ ;
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 285.00 .

Lawrence V. Fournillier

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LAWRENCE V. FOURNILLIER

Typed or printed name of signee

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is: ITONLINE.COM LLC

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

LAWRENCE V. FOURNILLIER
NAME

11595 TURNSTONE DRIVE
Florida street address (P. O. Box NOT ACCEPTABLE)

WELLINGTON FL 33414
CITY, STATE AND 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.

Lawrence V. Fournillier
SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA