

625000066561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

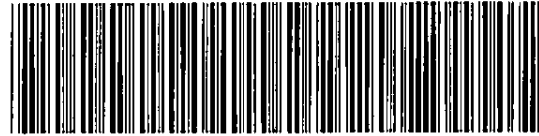
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500442650775

2025 FEB 17 PM 9:47

FILED

2025 FEB 17 PM 1:53

FILED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

TGM Madison Avenue, LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



2005 FEB 17 PM 3:47

___	Art of Inc. File	_____
___	LTD Partnership File	_____
___	Foreign Corp. File	_____
___	L.C. File	_____
___	Fictitious Name File	_____
___	Trade/Service Mark	_____
___	Merger File	_____
___	Art. of Amend. File	_____
___	RA Resignation	_____
___	Dissolution / Withdrawal	_____
___	Annual Report / Reinstatement	_____
___	Cert. Copy	_____
___	Photo Copy	_____
___	Certificate of Good Standing	_____
___	Certificate of Status	_____
___	Certificate of Fictitious Name	_____
___	Corp Record Search	_____
___	Officer Search	_____
___	Fictitious Search	_____
___	Fictitious Owner Search	_____
___	Vehicle Search	_____
___	Driving Record	_____
___	UCC 1 or 3 File	_____
___	UCC 11 Search	_____
___	UCC 11 Retrieval	_____
___	Courier	_____

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

**ARTICLES OF ORGANIZATION
TGM MADISON AVENUE, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I – NAME

The name of the Limited Liability Company is:
TGM Madison Avenue, LLC

ARTICLE II – ADDRESS

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

Principal Office Address:
600 Beachview Drive #2N
Indian River Shores, FL 32963

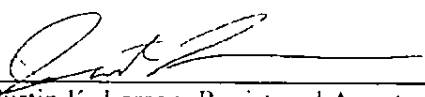
Mailing Address:
600 Beachview Drive #2N
Indian River Shores, FL 32963

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the initial Registered Agent are:

Justin K. Larson
979 Beachland Blvd.
Vero Beach, FL 32963

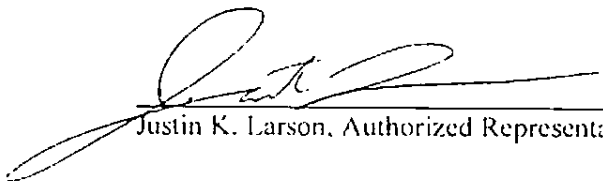
Having been named as initial Registered Agent and to accept service of process for the above stated Limited Liability Company at the place designated in this Article of these Articles of Organization, I hereby accept the designation as Registered Agent and agree to act in this capacity. I further agree 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 of the Florida Statutes.


Justin K. Larson, Registered Agent

ARTICLE IV – MANAGEMENT

The Limited Liability Company shall be a manager-managed limited liability company.

The initial Manager(s) of the limited liability company shall be Steven C. Olson and Carol F. Olson.


Justin K. Larson, Authorized Representative