

**STATE OF SOUTH CAROLINA
SECRETARY OF STATE**

**ARTICLES OF ORGANIZATION
Limited Liability Company – Domestic**

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to S.C. Code of Laws Section 33-44-202 and Section 33-44-203.

1. The name of the limited liability company (Company ending must be included in name*)

TBA Apartments LLC

*Note: The name of the limited liability company must contain one of the following endings: "limited liability company" or "limited company" or the abbreviation "L.L.C.", "LLC", "L.C.", "LC", or "Ltd. Co."

2. The address of the initial designated office of the limited liability company in South Carolina is
441 N. Duncan By-Pass, Suite 19

(Street Address)

Union, South Carolina 29379

(City, State, Zip Code)

3. The initial agent for service of process is

Tradd C. Bruce

(Name)

(Signature of Agent)

And the street address in South Carolina for this initial agent for service of process is:
441 N. Duncan By-Pass, Suite 19

(Street Address)

Union

South Carolina 29379

(City)

(Zip Code)

4. List the name and address of each organizer. Only one organizer is required, but you may have more than one.

(a)

Tradd C. Bruce

(Name)

441 N. Duncan By-Pass, Suite 19

(Street Address)

Union, South Carolina 29379

(City, State, Zip Code)

TBA Apartments LLC

Name of Limited Liability Company

(b)

(Name)

(Street Address)

(City, State, Zip Code)

5. ☒ Check this box only if the company is to be a term company. If the company is a term company, provide the term specified. 08/21/2124

6. ☒ Check this box only if management of the limited liability company is vested in a manager or managers. If this company is to be managed by managers, include the name and address of each initial manager.

(a)

Tradd C. Bruce

(Name)

441 N. Duncan By-Pass, Suite 19

(Street Address)

Union, South Carolina 29379

(City, State, Zip Code)

(b)

(Name)

(Street Address)

(City, State, Zip Code)

7. ☐ Check this box only if one or more of the members of the company are to be liable for its debts and obligations under Section 33-44-303(c). If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members. This provision is optional and does not have to be completed.

8. Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary of State. Specify any delayed effective date and time _____.

TBA Apartments LLC

Name of Limited Liability Company

9. Any other provisions not consistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement may be included on a separate attachment. Please make reference to this section if you include a separate attachment.

10. Each organizer listed under number 4 must sign.

Signed as Filer: Jonathan Moon: (Electronically Signed)

Signature of Organizer

Date: 08/22/2024

Signature of Organizer

Date: _____

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(Name)

441 N. Duncan By-Pass, Suite 19

(Street Address)

Union, South Carolina, 29379

(City, State, Zip Code)

TBA Apartments LLC

Name of Limited Liability Company

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(a)

Tradd C. Bruce

(Name)

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Union, South Carolina, 29379

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(b)

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Signature of Organizer

Date: _____

Signature of Organizer

Date: _____

Filing Checklist

- Two completed copies of this form must be submitted for filing.
- \$110.00 made payable to the South Carolina Secretary of State
- Self-addressed, stamped return envelope
- Make sure the organizer has signed the form. Only one organizer is required, but you may have more than one. If you have more than one organizer, every organizer listed on the form must sign. The organizer is the individual who completes the documents and delivers them for filing to the Secretary of State. The organizer may be an owner of the entity, but he or she does not have to be. The organizer may simply be an individual who assists in the formation of the LLC without having any involvement with subsequent ownership or operational functions.
- Return all documents to:
South Carolina Secretary of State's Office
Attn: Corporate Filings
1205 Pendleton Street, Suite 525
Columbia, SC 29201

SPECIAL NOTE

Registering your limited liability company name does not, in and of itself, provide an exclusive right to use this name on or in connection with any product or service. Use of a name as a trademark or service mark requires further clearance and registration and may be affected by prior use of the mark. For more information contact the Trademarks Division of the Secretary of State's Office.

Business Name: TBA Apartments LLC

Signature Page for a Secretary of State Business Filing


This page must be completed, scanned, and attached to any business filing where one of the following is true.

- The filing party signs the digital form on behalf of official signee.
- An attorney's signature is required. (Articles of Incorporation for Corporation and Benefit Corporation)

Official Signatures

(Officer, Incorporator, Director, Agent, Partner, etc)

Required for forms where the signee is not present upon online submission and a filing party is providing a digital signing on their behalf. If the provided space is not enough, please attach multiple pages.

Tradd C. Bruce	8/21/2024
Name	Date
	Member/Organizer
Signature	Title / Position
Name	Date
Signature	Title / Position
Name	Date
Signature	Title / Position
Name	Date
Signature	Title / Position
Name	Date
Signature	Title / Position

Scan and Upload this document to the Business Filing System during the filing process.
File must be PDF format.