

Charles Barner

Requester's Name

1020 E Lafayette St

Address

Suite 105
Tallahassee FL 32301

City/State/Zip

Phone #

L010000010617

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Trusted Third Party LLC

(Corporation Name)

(Document #)

2. _____

(Corporation Name)

(Document #)

3. _____

(Corporation Name)

(Document #)

4. _____

(Corporation Name)

(Document #)

☒ Walk in

☐ Pick up time

☒ Certified Copy

☐ Mail out

☒ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN 29 PM 3:19

APPROVED
AND
FILED

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-07/02/01--01003--003
****155.00 ****155.00

RECEIVED
01 JUN 29 PM 3:12
DIVISION OF CORPORATION

Examiner's Initials

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY
TRUSTED THIRD PARTY, LLC**

ARTICLE I – NAME

The name of the Limited Liability Company shall be Trusted Third Party, LLC.

ARTICLE II – ADDRESS

The mailing and street address of the principal office of Trusted Third Party, LLC, shall be:

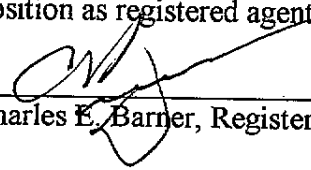
1020 E Lafayette St
Suite 105
Tallahassee, Florida 32301

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

The name and address of the registered agent and office are:

Charles E. Barner
1020 E Lafayette St
Suite 105
Tallahassee, Florida 32301

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 obligation of my position as registered agent as provided for in Chapter 608, F.S.


Charles E. Barner, Registered Agent

6/29/01
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

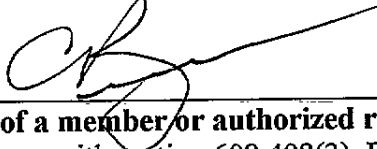
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AND
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ARTICLE IV – MANAGEMENT

Trusted Third Party, LLC, shall be a member managed company and the name and address of at least one of its members who will serve as a manager is:

Charles E. Barner
1020 E Lafayette St
Suite 105
Tallahassee, Florida 32301



Signature of a member or authorized representative of a member.

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

Charles E. Barner

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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