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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

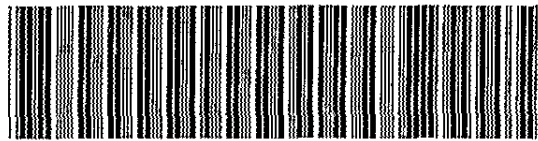
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

TRANSMITTAL LETTER

Registration Section
Division of Corporations
P O BOX 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: TRIN-AM ENTERPRISES LLC

Dear Sir or Madam:

Please find enclosed for filing one original and one copy of the ARTICLES OF ORGANIZATION. Also enclosed is a check in the amount of \$ 160.00 made payable to: Florida Department of State for the filing fee, designation of Registered Agent, certified copy, and certificate of status. If you need any additional information I can be reached at: 352-365-2400 or 352-669-4547.

Please return to: **TRIN-AM ENTERPRISES LLC**
 C/O DENO DEOLAL - Registered Agent
 1011 PERKINS STREET
 LEESBURG, FL 34748

NOTE: The original and one copy of the articles are enclosed.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: TRIN-AM ENTERPRISES LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
1011 Perkins Street in Leesburg, FL 34748.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Deno Deolal
Name
1011 Perkins Street
Florida street address (P.O. Box **NOT** acceptable)
Leesburg FL 34748
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 as provided for in Chapter 608, F.S.

[Signature]
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

[Signature]
Signature of a member or an 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.)

Deno Deolal

Typed or printed name of signer

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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