

L030000003557

(Requestor's Name)

ATHENE
5489 EAGLE LAKE DRIVE
PALM BEACH GARDENS, FL 33418

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

W03-1102

J. BRYAN JAN 14 2003

J. BRYAN JAN 30 2003



FLORIDA DEPARTMENT OF STATE
Ken Detzner
Secretary of State

January 14, 2003

ATHENE
5489 EAGLE LAKE DRIVE
PALM BEACH GARDENS, FL 33418

SUBJECT: TRI-MAR, LLC
Ref. Number: W03000001102

FILED
2003 JAN 29 AM 10:01
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for TRI-MAR, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 003A00001805

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Tri-Mar, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
Roger Brejcha, 512 West Burlington Ave., Suite 6A, LaGrange, IL 60525

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

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

Anthony Michalaros

Name

5489 Eagle Lake Drive

Florida street address (P.O. Box NOT acceptable)

Palm Beach Gardens FL 33418

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.

Registered Agent's Signature

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

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.)

ANTHONY MICHALAROS

Typed or printed name of signee

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)

FILED
2003 JAN 29 AM 10:01
JULIA H. CORPORACTIONS
TALLAHASSEE, FLORIDA