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LIMITE	D LIABILITY COMPAN Travincent, LLC	11 JANE 13 SIDREDA JANE 13 Y
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:** The name of the Limited Liability Company is:

## TRAVINCENT, LLC

ARTICLE II - Address:

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

Mailing Address: 3072 Patricia Avenue	Street Address: 3566 Deer Run South
Los Angeles, CA 90064	Palm Harbor, FL 34684
ARTICLE III - Registered Agent, Registered (	Office, & Registered Agent's Signature:

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

Craig E. Behrenfeld	_
	Name
601 Bayshore Boule	ward, Suite 700
Florida street a	ddress (P.O. Box <u>NOT</u> acceptable)
Tampa	FL 33606
	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 afficle must be added if an effective date is requested) LI WI STITTI AND. 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.)

David A. Gordon

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)

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