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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone

Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

triton tampa 352, llc

Certificate of Status	
Certified Copy	<u> </u>
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu





FOR

TRITON TAMPA 352, LLC

ARTICLE I. - NAME:

The name of this Limited Liability Company ("Company") shall be:

TRITON TAMPA 352, LLC

ARTICLE 1. - ADDRESS

The mailing address and street address of the principal office of the Company is: 5779 NW 151st Street, Miami Lakes, Florida 33014

ARTICLE II. - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to law.

ARTICLE III. - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such manager is:

Arthur Falcone 7602 Marblehead Lane Parkland, Florida 33067

And

Martin Caparros, Jr. 5779 NW 151st Street Miami Lakes, Florida 33014

And

Jose R. Boschetti 2901 SW 8 Street, Suite 204 Miami, Florida 33135

Signature of a member or an authorized representative of a member (to accordance with section 608.408(3), Florida Statutes the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

TRITON TAMPA 352, LLC

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

JOSE R. BOSCHETTI.

2901 S.W. 8 Street, Suite 204

Florida street address (F.O. 80X NOT ACCEPTABLE)

Miami, Florida 33135 CHY, 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 cartificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to eagipty 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.

SIGNATURE

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