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WOY-15036

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## TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations  |  |
|--|--|
| SUBJECT: TRENTCO, INC, (Name of Limited Liability Com  |  |
| The enclosed Articles of Organization and fee(s) are submitted for fill  Please return all correspondence concerning |  |
| Guendolyn C. 1 K<br>(Name of Person)   | _  |
| TRENTCU, INC, (Firm/Company)   | LLC  |
| 14403 MARK (Address)   | DRIVE                                      |
| LARGO FLORIDA (City/State and Zip Co   | 3377 <i>Y</i>                              |
| For further information concerning this matter, please call:   | (c)  |
| STEVEN TRENT at 813 (Name of Person) (Area Con   | 781-2866<br>Se & Daytime Telephone Number) |
|  |  |

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 19, 2004

GWENDOLYN C. TRENT TRENTCO, INC, LLC 14403 MARK DRIVE LARGO, FL 33774

SUBJECT: TRENTCO, INC, LLC Ref. Number: W04000015036

We have received your document for TRENTCO, INC, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

The name of the entity cannot include "INC." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 604A00025769

Division of Comparations DO DOY 6227 Tallahassas Florida 2221

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:                                  | - · · · · · · · · · · · · · · · · · · ·           |
|--|---|
| TRENTCO, C   | LC  |
| ARTICLE II - Address: The mailing address and street address of the princ                        | cipal office of the Limited Liability Company is: |
| Principal Office Address:  | Mailing Address:                                  |
| 14403 MARK DRIVE   |   |
| LARGO FLORIDA  |   |
| 33774  |   |
| · ·  |   |
| ARTICLE III - Registered Agent, Registered Of The name and the Florida street address of the reg | istered agent are:                                |
| Ghendolyn C.   | TRENT 5   |
| 14403 MARK<br>Florida street address (P.O. E   |   |
| LARG-D<br>City, State, and   | FLORIDA 33774                                     |

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

|  | E IV- Manager(s) or Mana<br>and address of each Manage | ging Member(s):<br>er or Managing Member is as follows: |
|--|--|---|
| Title: "MGR" = "MGRM"  | Manager<br>= Managing Member                           | Name and Address:                                       |
| MER  | ·  | STEVEN J. TRENT   |
|  |  | 14403 MAKK DRIVE  |
|  | ;<br>-   | LARGO, FL 33774   |
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|  |  |   |
| (Use attach  | ment if necessary)                                     |   |
|  |  | · · · · · ·   |
| NOTE: A  | n additional article must b                            | e added if an effective date is requested.              |
| REQUIRE  | D SIGNATURE:   |   |
|  |  | 7 ~~  |
|  | 48.4   | 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.) |  |   |
|  | SIEV   | EN TRENT  |
| ,  | Typed or pr  | rinted 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)