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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : M. BURR KEIM COMPANY
Account Number : F19990000242
Phone : (215)563-8113
Fax Number : (215)977-9386

04 AUG 26 AM 10: 25
SECRETARY OF STATE
DIVISION OF CORPORATIONS

RECEIVED
04 AUG 26 PM 3: 07
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY
TROPICAL PARTNERS, LLC

08/27/04

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing

Public Access Help

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((H040001752993))

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

TROPICAL PARTNERS, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2184 LOIS Blvd.

2184 LOIS Blvd.

Winter Haven, FL 33881

Winter Haven, FL 33881

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

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

Richard McCarthy

Name

2184 LOIS Blvd.

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

Winter Haven FLORIDA 33881

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, Florida Statutes..



Registered Agent's Signature

Page 1 of 2
(CONTINUED)

((H040001752993))

04 AUG 26 AM 10: 25

STATE OF FLORIDA
DIVISION OF CORPORATIONS

((H040001752993))

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGMR</u>	<u>Richard McCarthy</u> <u>5122 Sandpiper Lane</u> <u>St. Petersburg, FL 33711</u>
<u>MGMR</u>	<u>David Osborn</u> <u>8817 Pintail Court</u> <u>Plano, TX 75024</u>
<u>MGMR</u>	<u>Kay Evans</u> <u>51 Ivy Chase</u> <u>Atlanta, GA 30342</u>
<u>MGMR</u>	<u>Robert Kilinski</u> <u>475 Redding Trace</u> <u>Marietta, GA 30068</u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED 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.)

RICH McCARTHY

 Typed or printed name of signer

04/11/26 AM 10:25
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS

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)