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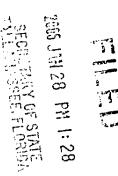
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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105-11824

TRANSMITTAL LETTER

TO: Registration Se Division of Cor				
SUBJECT: Trinity Re	eal Estate Investment, LLC			
	(Name of Limite	d Liability Company)		
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspondent	ondence concerning this matte	er to the following:		
Joseph E	E. Altschul			
		Name of Person)	······································	
		Firm/Company)		
		•		
1340 NW 12	26 Avenue			
		(Address)		
Sunris	se, FL 33323			
	(City	/State and Zip Code)		
For further information of	concerning this matter, please	call:		
Joseph E. Altschul		at (954) 770-8111		
(Name	of Person)	(Area Code & Daytime Te	elephone Number)	
Enclosed is a check fo	r the following amount:		7 _s 2	
Ø \$125.00 Filing Fce	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & 3.2.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3	Forester of the second
STREET ADDRESS:		MAILING A	DDRESS:	The state of the s
Registration Section Division of Corporations		Registration S Division of Co	orporations S	
409 E. Gaines Street Tallahassee, Florida 32399		P.O. Box 6321 Tallahassee, F		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Trinity Real Estate Investment, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the II Principal Office Address: 1340 NW 126 Avenue Sunrise, FL 33323 ARTICLE III - Registered Agent, Registered Office, & Registered The name and the Florida street address of the registered agent are: Joseph E. Altschul Name 1340 NW 126 Avenue Florida street address (P.O. Box NOT access Sunrise, FL 33323) FL City, State, and Zip Having been named as registered agent and to accept service of proculiability company at the place designated in this certificate, I hereby registered agent and agree to act in this capacity. I further agree to constitutes relating to the proper and complete performance of my duties accept the obligations of my position as registered agent as provided.						
ARTICLE II - Address: The mailing address and street address of the principal office of the I Principal Office Address: 1340 NW 126 Avenue Sunrise, FL 33323 ARTICLE III - Registered Agent, Registered Office, & Registered The name and the Florida street address of the registered agent are: Joseph E. Altschul Name 1340 NW 126 Avenue Florida street address (P.O. Box NOT access Sunrise, FL 33323) City, State, and Zip Having been named as registered agent and to accept service of procediability company at the place designated in this certificate, I hereby registered agent and agree to act in this capacity. I further agree to constant the proper and complete performance of my duties accept the obligations of my position as registered agent as provided.						
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Name 1340 NW 126 Avenue Florida street address (P.O. Box NOT accompany active places of proceed in this certificate, I hereby registered agent and to accept service of proceed in this certificate, I hereby registered agent and agree to act in this capacity. I further agree to act statutes relating to the proper and complete performance of my duties accept the obligations of my position as registered agent as provided.						
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J. H	y accept the appointment as omply with the provisions of all es, and I am familiar with and					
Religitered Agent's Signature (CONTINUED)	2005 JAN 28 PK SECRENARY OF S TALLAHASSIE, FL					

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Joseph E. Altschul 1340 NW 126 Avenue Sunrise, FL 33323
(Use attachment if necessary)	
NOTE: An additional article must be a REQUIRED SIGNATURE:	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 s an affirmation under the penalties of perjury
Joseph E. Altschul	or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE

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