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2005 MAR 30 AM IO: 42
DIVISION CORPORATIONS
DIVISION CORPORATIONS

TRANSMITTAL LETTER

TO: Registration S Division of Co			
SUBJECT:	Trongate Holdings	LLC	
		ed Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	
Please return all corresp	pondence concerning this matte	er to the following:	
	Steven C. Pearson		
	()	Name of Person)	·
	W. 14 . 14		
	Hand Arendall, L.		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company)	2005 HA
	112 West Laurel A		
		(Address)	2005 MAR 30 AP TO TO THE TOTAL OF SOME PORATION OF SOME FLORID OF TALLAHASSEE, FLORID
		6535 State and Zip Code)	
	()	<i></i>	50
For further information	concerning this matter, please	call:	
Steven C. Pe		at (251) 970-55	11
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisi 409 E.	ET ADDRESS: cration Section on of Corporations Gaines Street assee, Florida 32399	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7

ARTICLES OF ORGANIZATION FOR FLO	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	ORIDA LIMITED LIABILITY COMPANY
Irongate Holdings, LLC	SECOND IN
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	
Principal Office Address:	Mailing Address:
1010 Seminole Drive #512	1010 Seminole Drive #512
Fort Lauderdale, Florida 33304	Fort Lauderdale, Florida 33304
The name and the Florida street address of the re Albert Corte, III Name	-
1010 Seminole Dr.	ive #512
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Fort Lauderdale City, State, ar	
liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Albert Corte, III
	10'0 Seminole Drive #512
	Fort Lauderdale FL 33304
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	Trip 1
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(Use attachment if necessary)	
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NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
	Λ , Λ
/,	It It w
	www.
Signature of a member	er or an authorized representative of a member.
	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury nerein are true.)
	Corte, III
Ту	ped 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)