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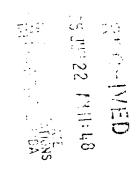
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PICK-UP WAIT MAIL				
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Trident Development + Construction, U OS JUN 22 PH 1:56

	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
WL 6/22 11:00	UCC 11 Search
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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANÝ

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The name of the Limited Liability Company is:

TRIDENT DEVELOPMENT & CONSTRUCTION, 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:**

215 Celebration Place, Suite 330 Celebration, Florida 34747

215 Celebration Place, Suite 330 Celebration, Florida 34747

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

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

William P. Gray, III, Esquire

Name

390 North Orange Avenue, Suite 1825

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

Orlando

FL 32801

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, F.S..

Registered Agent's Signature

(CONTINUED)

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" = Mana "MGRM" = Ma:		Name and Address:			
MGRM		Kevin Wardle 215 Celebration Place, Suite 330 Celebration, Florida 34747			
MGRM		Tim Deman  215 Celebration Place, Suite 330 Celebration, Florida 34747			
(Use attachment	• /	added if an effective date is requested.			
REQUIRED SI	gnature: <i>u ) Ma</i>	and West TI			
	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.)				
	William Typed	P. Gray, III 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)