

LOS000100991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

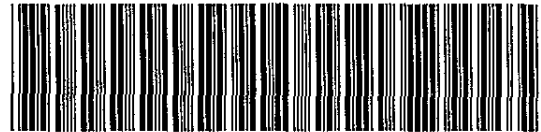
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500060163445

10/12/05--01017--001 **155.00

FILED
05 OCT 12 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 OCT 13 2005

LAW OFFICES

MARTIN & MARTIN

A PROFESSIONAL ASSOCIATION

200 LAKE MORTON DRIVE
SUITE 300
LAKELAND, FLORIDA 33801
863-688-7611

MAILING ADDRESS
POST OFFICE BOX 117
LAKELAND, FLORIDA 33802

FACSIMILE: 863-688-7329
E-MAIL: Lakmo@aol.com

October 11, 2005

SENT BY FEDERAL EXPRESS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Articles of Organization of TRIFLOW, LLC

Greetings:

Herewith Articles of Organization of TRIFLOW, LLC together with our check for \$155.00, to cover the following costs:

Filing Fee	\$125.00
Certified Copy	<u>30.00</u>
TOTAL	\$155.00

Please return the certified copy to our office in the enclosed Federal Express envelope which is charged to our account.

Call our office if you have questions 863-688-7611, extension 5 and ask for Kelly Olivier, extension 2 for the undersigned. Thank you.

Your very truly,


E. Snow Martin, Jr.

ESMjr/kao
cc/Rick Davis
Tom Murphy
Don Walden
Enclosures

FILED
05 OCT 12 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

TRIFLOW, LLC

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

ARTICLE I

NAME

The name of the Limited Liability Company is TriFlow, LLC.

ARTICLE II

PRINCIPAL OFFICE

The mailing address of the principal office of the Limited Liability Company is 26 Erindale Drive, Valrico, Florida 33594.

ARTICLE III

DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the filing of these Articles of Organization.

ARTICLE IV

PURPOSE

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

FILED
05 OCT 12 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V
MANAGEMENT

The Limited Liability Company is to be manager-managed. The names and addresses of the Initial Managers are:

Transcend Development Corporation – 3626 Erindale Drive, Valrico, Florida 33594

County Line Farms, LLC -- 10503 Sago Road, Tampa, Florida 33618

Martin Bezedek – 619 E. Davis Blvd., Tampa, Florida 33606

ARTICLE VI
INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is 3626 Erindale Drive, Valrico, Florida 33594 and the name of the initial registered agent of the Limited Liability Company at that office is Robert J. Appleyard.

ARTICLE VII
INDEMNIFICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

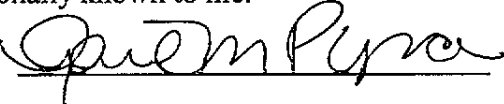
IN WITNESS WHEREOF, the undersigned, being an authorized representative of the Initial Managers, has executed these Articles of Organization this 10th day of October, 2005.

Robert J. Appleyard

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing Articles of Organization were acknowledged before me this ____ day of October, 2005, by Robert J. Appleyard who is personally known to me.

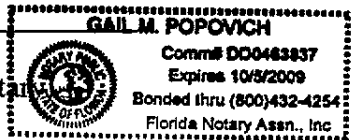
(AFFIX NOTARY SEAL)



NOTARY PUBLIC, State at Large

(Type or print name of Notary)

My Commission expires:



**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is TriFlow, LLC.
2. The name and street address of its initial Registered Agent and initial Registered Office are: Robert J. Appleyard, 3626 Erindale Drive, Valrico, Florida 33594.

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.



Robert J. Appleyard

Date: October 10, 2005

FILED
05 OCT 12 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA