# 200104350

equestor's Name	)
ldress)	····
ldress)	
ty/State/Zip/Phor	ne #)
WAIT	MAIL
isiness Entity Na	me)
ocument Number	)
_ Certificate	es of Status
Filing Officer:	
	OC 110
	Idress)  Idress)  Idress)  Idress)  Idress)  Idress Entity Phore  WAIT  Isiness Entity Na  Idress Entity Na  Idress Entity Na  Certificate

Office Use Only



800060861878

10/24/05--01025--030 \*\*160.00



### WILLIAM S. OSHINSKY

Attorney At Law 5606 Pollard Road Bethesda, Maryland 20816 (301) 320-4949 (301) 320-3344 Fax (301) 229-5295 woceansky **9** aol.com

October 19, 2005

To: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Subject: Triple L, LLC

The Enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

William S. Oshinsky
Law Office of William S. Oshinsky
5606 Pollard Road
Bethesda, Maryland 20816

For further information concerning this matter, please call: William Oshinsky, 301-320-4949.

Enclosed is a check for the following amount:

\$160 Filing fee, Certificate of Status and Certified Copy (additional copy is enclosed)

Sincerely

William S. Oshinsky

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

#### ARTICLE I - NAME:

The name of the Limited Liability Company is: Triple L, 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:**

4898 Keenland Cirle Orlando, Florida 32819 4898 Keenland Circle Orlando, Florida 32819

## ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:

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

Effridge Lee 4898 Keenland Circle Orlando, Florida 32819

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.

Effridge Lee, Registered Agent

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statues, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Effridge Lee

Typed or printed name of signee