

L07000008/58

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

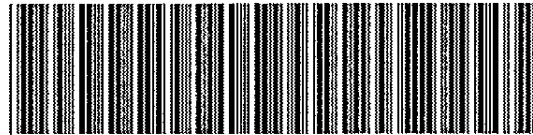
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TALLAHASSEE, FLORIDA

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CÓVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Triplex Broward, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen A. Taylor
(Name of Person)

Stephen A. Taylor, P.L.
(Firm/Company)

44 W. Flagler St., Suite 675
(Address)

Miami, FL 33130
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen A. Taylor at (305) 722-0091
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION OF
TRIPLEX BROWARD, LLC

ARTICLE I
NAME

The name of this Limited Liability Company shall be TRIPLEX BROWARD, LLC (the "Company").

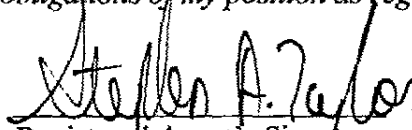
ARTICLE II
PRINCIPAL PLACE OF BUSINESS

The principal place of business and mailing address of the Company shall be 1001 N. Federal Highway, Suite 354, Hallandale Beach, FL 33009, and such other place or places as the member(s) from time to time may determine.

ARTICLE III
INITIAL REGISTERED OFFICE AND
REGISTERED AGENT

The initial registered agent of the Company shall be SAT Registered Agents, LLC. The address of the initial registered agent is 44 West Flagler Street, Suite 675, Miami, FL 33130.

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

ARTICLE IV
MANAGEMENT

The Company will be a manager-managed company, and will be managed by a manager or managers who may be, but are not required to be, a member of the Company. The name and address of the manager who will serve as manager until the first annual meeting of members or until his successor is selected and qualified in accordance with the Operating Agreement or applicable law is:

Rick Yarosh
1001 N. Federal Highway, Suite 354
Hallandale Beach, FL 33009

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 17 day of January, 2007, effective upon filing same with the Florida Department of State.

TRIPLEX BROWARD, LLC

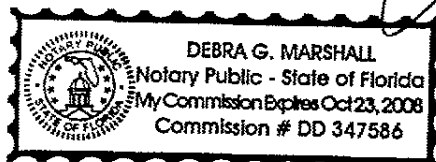
BY:

Rick Yarosh
Rick Yarosh, Member and Manager

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TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) ss:
COUNTY OF Broward)

The foregoing instrument was acknowledged before me this 17 day of January 2007, 2007, by RICK YAROSH, who did execute the foregoing Articles of Organization as the Manager and Member of TRIPLEX BROWARD, LLC, who is personally known to me, or who has produced FLDL Y620738742850 as identification, and being first duly sworn, acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.



Debra G. Marshall
Signature - NOTARY PUBLIC

Debra G. Marshall
Printed Name of NOTARY PUBLIC

Oct 23 2008
Commission Number