## L07000008189

Dawn						
(Requestor's Name)						
208 Deboury DY (Address)						
(Address)						
Deboy FL 327-13 (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



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO;	Registration Sec Division of Cor		•				
SUBJECT: Trinity Accounting Solutions, 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:							
	Dawn M. W	<del></del>			· · · · · · · · · · · · · · · · · · ·		
(Name of Person)							
Trinity Accounting Solutions, LLC							
(Firm/Company)							
208 Debary Drive							
			(Address)				
	Debary, FI	_ 32713					
		(City)	State and Zip Co	de)			
For further information concerning this matter, please call:							
Dawn M. Ward			at ( 386 ) 668-3376				
<u> </u>	(Nume	of Person)		de & Daytime To	elephone Numbor)		
Enclosed is a check for the following amount:							
\$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Certified Co (additional cop		\$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	Registri Divisio Clifton 2661 E	Courier Addression Section of Corporation Building xecutive Center usee, FL 32301	TIS .		

Tools

CONTROLLEY DES

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MRIICLE I - I		Campagnia		
i ne name oi th	e Limited Liability	Company is:		
Trinity Accounti	ing Solutions, LLC			
		Company, "Limited Company" or their	r abbreviation "LLC," or "L.C.	-,")
	- •	• • • • • • • • • • • • • • • • • • • •		
ARTICLE II -				
The mailing ad	dress and street ad	dress of the principal office o	I the Limited Liability	Company is:
Principal Offic	e Address:	Mailing Add	ress:	
208 Debary Drive		208 Debary Driv	e	
Debary, FL 32713		Debary, FL 327	13	
(The Limited Liabili business entity with	ity Company cannot servita an active Florida regis	ddress of the registered agent	ist designate an individual or m	TAIL AHASSEF, ELORID.
		Name	; (	名表。るこ
	208 Debary D	Orive	<u> </u>	T9 <b>7</b> (
		Plorida street address (P.O. Box N		က္က <b>က</b> ္က ၂
	Debary	FL 32713		음음 <b>5</b> 3
		City, State, and Zip		<b>&gt;</b>
liability co registered age statutes relat	mpany at the place nt and agree to act ting to the proper a obligations of my p	d agent and to accept service of designated in this certificate, I further agree and complete performance of mosition as registered agent as add Agent's Signature (REQUIRED)	hereby accept the appo ee to comply with the pro by duties, and I am famili provided for in Chapter	intment as ovisions of all iar with and

(CONTINUED)
Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Dawn M. Ward 208 Debary Drive Debary, FL 32713 Timothy J. Ward MGR 208 Debary Drive Debary, FL 32713 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Dawn M. Ward Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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