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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
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Special Instructions to Fili	ing Officer:	
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10:	Division of Co			
SUBJI	ECT: TRIKE	I'T WELDING LLC	ed Liability Company)	***************************************
		minica to smarr)	ed Diability Company)	
The en	closed Articles of	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this matt	er to the following:	
	LELAND	N BECHTOL		
		((Name of Person)	
	TRIKE T	T WELDING LLC	(Firm/Company)	
	16286 C	ORTEZ BLVD.	` ' ' ' '	
			(Address)	
	BROOKSV	ILLE FL 34601		
		(City	/State and Zip Code)	
For furt	her information	concerning this matter, please	call:	
	LELAND 1	N BECHTOL	at (352) 263-81	Δ 4
-	(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclose	ed is a check fo	or the following amount:		
△ \$125	. 00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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 Corporation Clifton Building 2661 Executive Center Tellphasses Ft 32301	ns Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Addre	•	incipal office of the Limited Liabi Mailing Address:	
16286 CORTEZ BL	VD.	SAME	
BROOKSVILLE FL	34601		
The name and the Florid	la street address of the received N BECHTOL Name	egistered agent are:	FILED 7 OCT 26 AM II: 31 PUNE STATI LLAHASSEE, FLORIG
•	16286 CORTEZ BLY	VD.	₽S =
	Florida street addi	ress (P.O. Box NOT acceptable)	0 T
	Florida street addi	ress (P.O. Box <u>NOT</u> acceptable)	TATE ORIG

(CONTINUED) Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member N BECHTOL MGR. 16286 CORTEZ BLVD. BROOKSVILLE FL 34601 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: OCT 30 2007 (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:** ignature 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.) ELAND BECHTOL Typed 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)

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

\$ 5.00 Certificate of Status (Optional)