

LO9000035420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

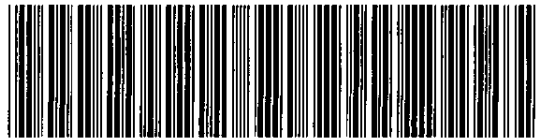
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APR 13 2009

EXAMINER

Gary M. Crist
Attorney

April 6, 2009

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Triangle Films, LLC.

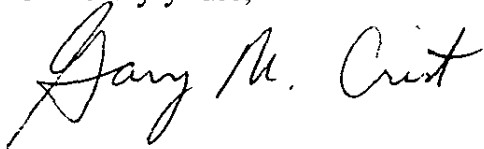
Dear Sir or Madame:

Enclosed herewith are (a) Articles of Organization, (b) Acceptance of Registered Agent and (c) a check in the amount of \$ 125.00.

Please return to the letter of acknowledgment upon registration to my attention.

Thank you.

Sincerely yours,



Encs.

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

**ARTICLE I
Name**

The name of the Limited Liability Company is: TRIANGLE FILMS, LLC:

**ARTICLE II
Address**

The mailing address and street address of the principle office of the Limited Liability Company is:

36 Dorchester Circle
Palm Beach Gardens, FL 33418

**ARTICLE III
Duration**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV
Purpose**

The purpose of the Limited Liability Company shall be to conduct any lawful business.

**ARTICLE V
Management**

The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is:

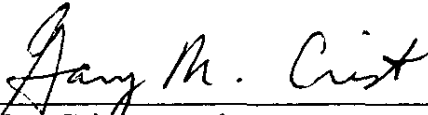
Gary M. Crist
36 Dorchester Circle
Palm Beach Gardens, FL 33418

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TALLAHASSEE, FLORIDA

ARTICLE VI
Affidavit of Membership and Contributions

The undersigned member of TRIANGLE FILMS, LLC. certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member is \$10.00;
- 3) no property is being contributed; and
- 4) the total amount of cash and property contributed and anticipated to be contributed by the member is \$10.00.



Gary M. Crist, Member

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TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE

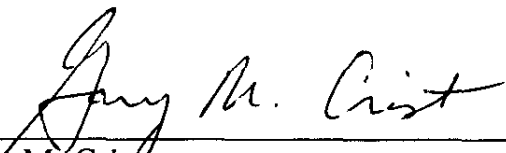
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PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY
SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A
REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF
FLORIDA.

1. The name of the Limited Liability Company is TRIANGLE
FILMS, LLC.
2. The name and the Florida address of the registered agent are:

Gary M. Crist
36 Dorchester Circle
Palm Beach Gardens, FL 33418

*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.*



Gary M. Crist