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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

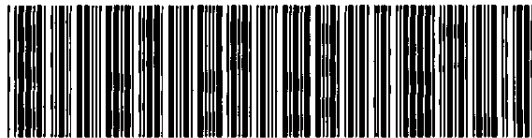
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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1009000023528

Office Use Only



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05/29/09--01005--015 \*\*76.25

05/15/09--01010--012 \*\*78.75

FILED  
09 MAY 28 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 29 2009

EXAMINER

**BRUCE A. HOCHSTETLER**

ATTORNEY AT LAW  
213 SILVER BEACH AVENUE  
DAYTONA BEACH, FL 32118

BARS ADMITTED:  
OHIO  
FLORIDA

May 12, 2009

GENERAL PRACTICE OF LAW  
(386) 252-2640  
FAX: (386) 253-7802

Department of State  
Division of Corporations  
Corporate Records Bureau  
P. O. Box 6327  
Tallahassee, Florida 32314

Re: Triceratops Enterprises, LLC

Dear Sir/Madam:

Enclosed are the original and one copy of Articles of Incorporation for the above-named LLC. In addition, a check in the sum of \$78.75 is enclosed which represents the following fees:

Filing fee	\$35.00
Certified copy	8.75
Registered Agent fee	\$35.00

Please file the original of the enclosed Articles of Incorporation and return a certified copy to the undersigned. Thank you for your cooperation in this matter.

Sincerely yours,

  
BRUCE A. HOCHSTETLER

BAH:ad  
Enclosure

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09 MAY 28 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 19, 2009

BRUCE A. HOCHSTETLER, ATTORNEY AT LAW  
213 SILVER BEACH AVENUE  
DAYTONA BEACH, FL 32118

SUBJECT: TRICERATOPS ENTERPRISES, LLC  
Ref. Number: W09000023528

We have received your document for TRICERATOPS ENTERPRISES, LLC and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$76.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 109A00016938

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR A FLORIDA  
LIMITED LIABILITY COMPANY

Article I

The name of the Limited Liability Company is called **Triceratops Enterprises, LLC**

Article II

Address

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

2828 N. Atlantic Avenue, Suite 1603  
Daytona Beach, Florida 32118

Article III

Duration

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

Article IV

Management

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

~ Robert Facchini, 2828 N. Atlantic Avenue, Suite 1603, Daytona Beach, FL 32118

Article V

Admission of Additional Members

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be by unanimous consent of the managing members in conjunction with the provisions set forth in the By-Laws of the Limited Liability Company.

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TALLAHASSEE, FLORIDA

Article VI  
Continuation of Business

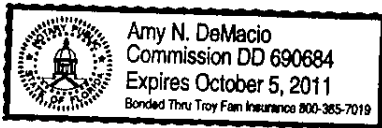
The managing members may continue business even after the death, bankruptcy, finding of incompetency, disability, or resignation of any managing member, but only with compliance with Florida Statutes and the By-Laws of the Limited Liability Company.

  
Robert Facchini

STATE OF FLORIDA  
COUNTY OF VOLUSIA

BEFORE ME, the undersigned authority, personally appeared Robert Facchini, well known to me as the person described in and who did(did not) take an oath, and who executed the foregoing instrument and acknowledged to and before me that he executed said instrument in the capacity and for the purposes therein expressed.

WITNESS my hand and official seal this 13 day of May, 2009 in the County and State first above written.



  
NOTARY PUBLIC

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TALLAHASSEE, FLORIDA


CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT to the provisions of §608.415 or §608.507, 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 **Triceratops Enterprises, LLC**

2. The street address of the registered agent and office is **Robert Facchini, 2828 N. Atlantic Avenue, Suite 1603, Daytona Beach, Florida 32118.**

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.

  
Robert Facchini

May 13, 2009  
Date

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**09 MAY 28 PM 3:31**  
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TALLAHASSEE, FLORIDA