## 110000129443

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number	
(50	oument Number,	
Certified Copies	Certificate	s of Status
,	_	
Special Instructions to	Filina Officer:	
-,	<b>3</b>	

G. MCLEOD

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**EXAMINER** 



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

10 DEC 17 PH12: 0

## **COVER LETTER**

TO: Registration Sec Division of Corp		*	•
<sub>SUBJECT:</sub> Trust In	iternational LLC	;	
<u></u>		ed Liability Company	
The enclosed Articles of O	organization and fee(s) are	submitted for filing.	
Please return all correspon	dence concerning this matt	ter to the following:	
Ray Palme	er		
		Name of Person	
Trust Interr	national LLC		
		Firm/Company	
25547 Haw	/ks Run Lane		
		Address	
Sorrento, Flo	orida 32776		
	Cit	y/State and Zip Code	
rnpwave@ao		for future annual report notification)	
For further information con	·	•	
Ray Palmer		at (407 ) 399-2216	
Name of	Person	Area Code & Daytime Telep	phone Number
Enclosed is a check for t	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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	ny is:	
Trust International LLC		
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
25547 Hawks Run Lane	(Same)	
Sorrento, Florida 32776		
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.)		ridual or another
The name and the Florida street address of	f the registered agent are:	F
Raymond Palmer		See -
	Name	
25547 Hawks	Run Lane	PH 12: 05 OF STATE OF LORIDA
Florida str	reet address (P.O. Box NOT acceptable)	STATE STATE
Sorrento, Florida 3	2776 <sub>FL</sub>	<b>⊘</b> A <b></b>
	City, State, and Zip	

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 (REOLIRED)

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member	
MGRM	Ray Palmer
	25547 Hawks Run Lane
	Sorrento, Florida 32776
MGRM	. Michael Palmer
	25547 Hawks Run Lane
	Sorrento, Florida 32776
	<u> </u>
(Use attachment if necessary)	
LE V: Effective date, if other than	n the date of filing: (OPTIONA
ffective date is listed, the date mi	ust be specific and cannot be more than five business day
days after the date of filing.)	•
DECKEDED OF CALABIDE	
REQUIRED SIGNATURE:	

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

**Raymond Palmer** 

Typed or printed name of signee

Filing Fees:

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

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