

L11000064478

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

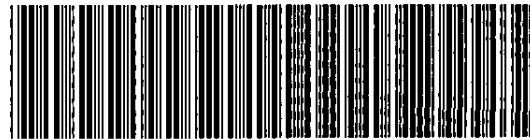
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

11000027513

Office Use Only

EFFECTIVE DATE 6/1/11



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05/17/11--01004--028 \*\*155.00

FILED  
11 JUN - 1 AM 4:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 02 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 18, 2011

WESLEY JONES  
31834 PARKDALE DR.  
LEESBURG, FL 34748

SUBJECT: TRINITY ELECTRIC OF LAKE COUNTY, LLC  
Ref. Number: W11000027513

We have received your document for TRINITY ELECTRIC OF LAKE COUNTY, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on May 17, 2011. Please amend your document accordingly.

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: 011A00012379

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11 JUN - 1 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Trinity Electric of Lake County, 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:

Wesley Jones

Name of Person

Trinity Electric of Lake County, LLC

Firm/Company

31834 Parkdale Dr.

Address

Leesurg, Florida 34748

City/State and Zip Code

wes@trinityelectric.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wesley Jones

Name of Person

at ( 352 ) 434-2689

Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle  
Tallahassee, FL 32301

FILED  
JUN - 1 AM 11:49  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Trinity Electric of Lake County, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

### Principal Office Address:

31834 Parkdale Dr.  
Leesurg, Florida 34748

### Mailing Address:

31834 Parkdale Dr.  
Leesurg, Florida 34748

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Wesley E. Jones

Name

31834 Parkdale Dr.

Florida street address (P.O. Box **NOT** acceptable)

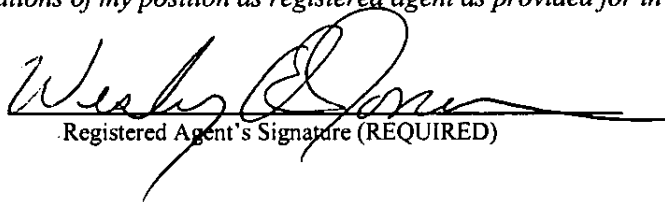
Leesburg

FL 34748

City, State, and Zip

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JUN - 1 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 (REQUIRED)

(CONTINUED)

EFFECTIVE DATE 6/1/11

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

Mgr

Wesley Jones

31834 Parkdale Dr.

Leesburg, FL 34748

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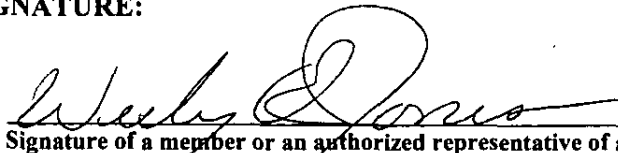
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(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing:** June 1, 2011 (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. 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.)

Wesley E. Jones

Typed or printed name of signee

FILED  
11 JUN -1 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fees:**

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

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**