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SECRETARY OF STATE

APPROVED AND FILED

D. BRUCE

AUG 0 7 2012

EXAMINER

COVER LETTER

TO: Registration of	on Section Corporations				
SUBJECT:	Zach Barth Name of Limited L	nolomew Trio	LLC.	_	
The enclosed Article	es of Organization and fee(s) are subr	nitted for filing.			
Please return all corn	respondence concerning this matter to	the following:			
Annual Control Control	Zach Bar Nar	thalomew ne of Person	——————————————————————————————————————		
·	Fin	m/Company			
**************************************	2817 Blair	Stane Ct. Address			
	Tallahassa	2e, FL 3230 ate and Zip Code		<u> </u>	
		email.com		SECF ALL!	1 A
	E-mail address: (to be used for fe	nure annual report notification)		ETARY HASSE	AUG "
For further informati	ion concerning this matter, please cal	1:		$-$ m $_{\odot}$	Ò
Zach B	artholomew at me of Person	(<u>\$50</u>) <u>545-6</u> Area Code & Daytime Tele	ephone Number)F STATE , FLORIDA	4C - 74 U
Enclosed is a check	k 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 Certificate of St Certified Copy (additional copy is	tatus &	
	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 (Tallahassee, FL 32301	S		

APPROVED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Zach Bartholomew Trio 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: Mailing Address:	
7814 Blairstone Ct. Tallahassee, PC 32301 Tallahassee, PC 32301	
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:	AND

Page 1 of 2

(CONTINUED)

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Zach Bartholomew
	2819 Blaistone Ct
MGRM	Tallahasseo, FL 32301
14 C 12 111	Miles Bozeman
	TAIIANASSEE, FL 32309
MACO	
MGRM	Brandon Kobertson 132 Dixie Or Unit3
	Tallahassee, Fl. 32304
	
(Use attachment if necessary)	•
(Ose uniciment if necessary)	
	e date of filing: (OPTIONAL)
(it an effective date is listed, the date must b to or 90 days after the date of filing.)	e specific and cannot be more than five business days prior
•	TAI S
REQUIRED SIGNATURE:	CECR 2 AL
SIGNATURE.	AP A
// //-	ARYO SSEE
Signature of a member	er or an authorized representative of a member.
(In accordance with section 60)	8.408(3), Florida Statutes, the execution of this document
constitutes an affirmation unde	er the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State
constitutes a third degree felon	y as provided for in s.817.155, F.S.)
Z_{ac}	yped or printed name of signee
	ped of printed liaine of signee
Filing Food	

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)