## 13000107313

| (Requestor's Name)                      |        |
|---|--------|
|   |        |
| (Address)                               |        |
|   |        |
| (Address)                               |        |
|   |        |
| (City/State/Zip/Phone #)                |        |
|   |        |
| PICK-UP WAIT MAIL                       | •      |
|   |        |
| (Business Entity Name)                  |        |
|   |        |
| (Document Number)                       |        |
|   |        |
| Certified Copies Certificates of Status |        |
|   |        |
| Special Instructions to Filing Officer: | $\neg$ |
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Office Use Only



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Effective Date 8-15-13

07/29/13--01031--006 \*\*130.00

J. SAULSBERRY EXAMINER

JUL 30 2013

## **COVER LETTER**

| TO:              | Registration S<br>Division of Co |   | `   |                      |
|------------------|----------------------------------|---|---|----------------------|
| SUBJE            | Tripl                            | e W Propertie   | es  |                      |
| SOBJE            |                                  |   | ted Liability Company   |                      |
| The end          | closed Articles o                | f Organization and fee(s) are   | submitted for filing.   |                      |
| Please r         | return all corresp               | ondence concerning this matt  | ter to the following:   |                      |
|                  | Kent W                           | agner agner   |   |                      |
| •                |                                  |   | Name of Person  | -                    |
| _                |                                  |   |   |                      |
|                  |                                  |   | Firm/Company  | _                    |
|                  | 108 Syl                          | lvania Dr.  | 70  |                      |
| •                |                                  |   | Address   | -                    |
|                  | Beaver                           | creek, OH 45  | 440   |                      |
| •                |                                  |   | ty/State and Zip Code   | <del>&gt;</del><br>_ |
| <u> </u>         | kent@wa                          | gnersonline.net   |   | 30                   |
|                  |                                  |   | for future annual report notification)  | ب<br>4               |
|                  |                                  | concerning this matter, please  | ecall:  |                      |
| Ker              | nt Wagr                          | ner   | <sub>at</sub> 937 532-9100  |                      |
|                  | Name                             | of Person   | Area Code & Daytime Telephone Number  |                      |
| Enclose          | ed is a check for                | or the following amount:  |   |                      |
| <b>⊒\$</b> 125.0 | 00 Filing Fee                    | ■\$130.00 Filing Fee & Certificate of Status  | □\$155.00 Filing Fee & □ \$160.00 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  |                      |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of t                          | - Name:<br>he Limited Liability Company is:   |  |                                  |
|--|---|--|----------------------------------|
|  | no Elimino Elacinity Company is:  |  |                                  |
| Triple W Properti                      | es LLC.   |  |                                  |
|  | (Must end with the words "Limited Liability   | Company, "L.L.C.," or "LLC.")  |                                  |
| ARTICLE II                             | - Address:  |  |                                  |
| The mailing a                          | ddress and street address of the prin   | cipal office of the Limited Li   | ability Company is:              |
| Principal Off                          | ïce Address:  | Mailing Address:   |                                  |
| Kent Wagner                            |   | Kent Wagner  |                                  |
| 108 Sylvania Dr.                       |   | 108 Sylvania Dr.   |                                  |
| Beavercreek, OH                        | 45440   | Beavercreek, OH  | <del></del>                      |
| (The Limited Liab                      | I - Registered Agent, Registered Cility Company cannot serve as its own Registered ith an active Florida registration.)   | Office, & Registered Agent's   |                                  |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Company cannot serve as its own Registered (the an active Florida registration.)  the Florida street address of the reg  | Office, & Registered Agent's d Agent. You must designate an indiv  |                                  |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Cility Company cannot serve as its own Registered ith an active Florida registration.)   | Office, & Registered Agent's d Agent. You must designate an indiv  |                                  |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Collity Company cannot serve as its own Registered than active Florida registration.)  the Florida street address of the regence Wagner  Name  | Office, & Registered Agent's d Agent. You must designate an indiv  |                                  |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Could be some served as its own Registered that an active Florida registration.)  the Florida street address of the registre Wagner  Name  1920 47th Ave   | Office, & Registered Agent's d Agent. You must designate an indivistered agent are:                                | idual or another  2013 JUL 29    |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Could be some served as its own Registered that an active Florida registration.)  the Florida street address of the registre Wagner  Name  1920 47th Ave   | Office, & Registered Agent's d Agent. You must designate an indiv  | idual or another                 |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Company cannot serve as its own Registered ith an active Florida registration.)  the Florida street address of the registration Name  1920 47th Ave  Florida street address Agent Florida Street address Agent Florida Street Agent | Office, & Registered Agent's d Agent. You must designate an indivistered agent are:                                | idual or another  2013 JUL 29 AM |
| (The Limited Liab<br>business entity w | I - Registered Agent, Registered Company cannot serve as its own Registered ith an active Florida registration.)  the Florida street address of the registration Name  1920 47th Ave  Florida street address Agent Florida Street address Agent Florida Street Agent | Office, & Registered Agent's d Agent. You must designate an indivistered agent are:  See (P.O. Box NOT acceptable) | idual or another  2013 JUL 29    |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| "MGRM" = Managing Member  |                                     |                                  |
|---|-------------------------------------|----------------------------------|
| MGR   | Kent Wagner                         |                                  |
|   | 108 Sylvania Dr                     |                                  |
|   | Beavercreek, OH 45440               |                                  |
| MGRM  | Charles Wagner                      |                                  |
|   | 11274 Curtis Rd                     |                                  |
|   | North East, PA 16428                |                                  |
| MGRM  | Eric Wagner                         | 20                               |
|   | 1920 47th Ave                       | دن الله                          |
|   | Vero Beach, FL 32966                | = ==                             |
|   |                                     | 29                               |
| <del></del>   |                                     | And the second                   |
|   | <del> </del>                        |                                  |
|   |                                     |                                  |
| (11   |                                     |                                  |
| (Use attachment if necessary)   |                                     |                                  |
| LE V: Effective date, if other than ffective date is listed, the date n   | nust be specific and cannot be more | . (OPTIONA<br>e than five busine |
| (Use attachment if necessary)  LE V: Effective date, if other than ffective date is listed, the date nor 90 days after the date of filing REQUIRED SIGNATURE: | nust be specific and cannot be more |                                  |
| LE V: Effective date, if other than ffective date is listed, the date n or 90 days after the date of filing REQUIRED SIGNATURE:                               | nust be specific and cannot be more | e than five busine               |

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)