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TO:

Registration Section Division of Corporations

COVER LETTER

SUBJECT: TRIPLE R REPOVATIONS		
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:		
Jesse Cook		
Jesse Cook Name of Person		
Triple R REPOURTIONS		
Firm/Company		
33 Britton dr		
Address		
Address PAPACEA, FL 32346 City/State and Zip Code		
City/State and Zip Code		
City/State and Zip Code Tesse Triple R & gmail		
For further information concerning this matter, please call:		
Tesse cook at (850) 274-2907 Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status	13 OCT	
Mailing Address Registration Section Division of Corporations P.O. Boy 6327 Clifton Building	29 PH	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:				
Triple R Reports (Must end with the words "Limited Liability	ors 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 principle.	cipal office of the Limited Liability	Compai	ny is:	
Principal Office Address:	Mailing Address:			
BANACEA, FI 32346	Br, HON DY PAPACEA, FL	<u>-</u> -	46	
ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	Office, & Registered Agent's Signal Agent. You must designate an individual or a	ature: another		
The name and the Florida street address of the reg	istered agent are:			
Jesse cook Name	·			
			,	
33 Britton d	<u> </u>			
Florida street addre	ss (P.O. Box <u>NOT</u> acceptable)			
PAPACEA City, State	FL 3344			
Having been named as registered agent and to ac liability company at the place designated in the registered agent and agree to act in this capacity all statutes relating to the proper and complete and accept the obligations of my position as regi	is certificate, I hereby accept the app v. I further agree to comply with the performance of my duties, and I am	ointmen provisio familiar	nt as ons of with	
Registered Agent's Signatur	e (REQUIRED)	SECHMENT	13 0CT 29 F	
(CONTINU	ED)	H.S.H.	PH =:	
Page 1 of 2		XI''	<u>,</u>	



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

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

"MGR" = Manager "MGRM" = Manag	ing Member	Name and Address:
MgRM		JESSE COOK 33 BOTTON DI PANACEA, FL 3234
·		
(Use attachment if the LEV: Effective dates	te, if other than the	e date of filing: (OPTIONA t be specific and cannot be more than five busines
ffective date is list	ic date of ming.	
effective date is listed or 90 days after the REQUIRED SIGN		

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.)

Tesse

Typed or printed name of signee

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)