200/68/64 florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000258860 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

Phone : (305) 634-3694

Fax Number

: (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Plans Led 11/88/13

0FLORIDA LIMITED LIABILITY CO.

Certificate of Status Certified Copy

\$155.00

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EMPIRE CORP

11/22/2013

15/04/5013 03:52

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December 4, 2013

PLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: TREZINA LLC REF: W13000066128

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Limited liability companies are either member-managed or manager-managed not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members. If the limited liability company is manager-managed, list the names and addresses of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II FAX Aud. #: H13000258860 Letter Number: 513A00027571 EC-4 AM 9: 30

P.O BOX 6327 - Tallahassee, Florida 32314

H13000Z58860

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The Name of the Limited Liability Company shall be:

TREZINA LLC

ARTICLE II

TILED

13 NOV 22 AM 8:
SECRETARY OF STATE
FALLARIASSEE, FLORID

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the act.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is:

7604 APPLE TREE CIRCLE ORLANDO, FL 32819

ARTICLE IV

The name of the Managing Member(S) shall be:

TALEB GHAZAL 7604 APPLE TREE CIRCLE ORLANDO, FL 32819

ARTICLE Y

The name and Florida street address of the registered agent shall be:

TALEB GHAZAL 7604 APPLE TREE CIRCLE ORLANDO, FL 32819

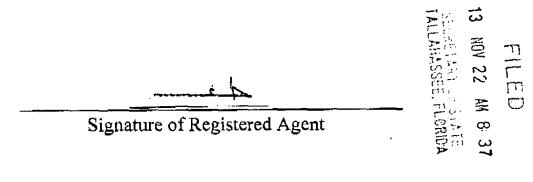
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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

TREZINA LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



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)

TALEB GHAZAL

Typed or printed name signee

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