LE000189319

(Requestor's Name)						
(Address)						
(City/State/Zip/Phone #)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

٩.

.

Office Use Only



11/10/15--01002--014 **125.00



FILED

NOV 1 0 2015

T SCHROEDER

CERTIFIED CO PHOTOCOPY	PICK UP:	WALK IN	N 10/15		
		/	10/15		
	PY	1	1		
рнотосору					
				_	
CUS					
FILING		LLC			
	PROPE D DOCUMENT #)	RTY M	ANAGEN	<u>IENT, L</u>	LC
CORPORATE NAME AN	D DOCUMENT #)			. <u> </u>	
CORPORATE NAME AN	D DOCUMENT #)			-	
CORPORATE NAME AN	D DOCUMENT #)				
CORPORATE NAME AN	D DOCUMENT #)				
	FILING TRIPLE M CORPORATE NAME AN CORPORATE NAME AN CORPORATE NAME AN	FILING	FILING <u>LLC</u> <u>TRIPLE M PROPERTY M</u> (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	FILING <u>LLC</u> <u>TRIPLE M PROPERTY MANAGEM</u> (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)	FILING <u>LLC</u> TRIPLE M PROPERTY MANAGEMENT, L. (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)

ARTICLES OF ORGANIZATION

.

· · · ·

FOR

TRIPLE M PROPERTY MANAGEMENT, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — NAME:

The name of the Limited Liability Company shall be: TRIPLE M PROPERTY MANAGEMENT, LLC (the "Company").

ARTICLE II — ADDRESS:

	22	ന	
The street address of the principal office of the Company shall be as follows:		-	
	I. ji	V0V	
	5		۳ ۲ -
3421 Porter Road Lithia, FL 33547	23	5	172.1
······································			ักร
			۲ <u>.</u>
The mailing address of the Company shall be as follows:			
•	02		
	골목	N	
3421 Porter Road Lithia, FL 33547	Su	<u> </u>	
	1.40		

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is 121 North Collins Street, Plant City, Florida 33563, and the name of the registered agent at such address is James C. Davis, II., Esquire.

ARTICLE IV – MANAGEMENT

The Company shall be managed by the Members.

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this 13 day of October, 2015. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

,

Uchup M. Tonya M. Mayo, Organizer zo. \mathcal{L}

15 NOV 10 PM 1:21 JAHASSE FORD

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0113Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:

. _ . . . _

, 1

2.

TRIPLE M PROPERTY MANAGEMENT, LLC

The name and address of the registered agent and office is: James C. Davis, II., Esquire 121 North Collins Street Plant City, Florida 33564

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.

JAMES C. DAVIS, II., ESQUIRE

10-15-15 Date