

L15000201023

Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
TRIPLE X CHARTERS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I NAME**

The name of the Limited Liability Company is:

TRIPLE X CHARTERS, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

681 SE NORSEMAN DRIVE
PORT SAINT LUCIE, FLORIDA 34984**ARTICLE III REGISTERED AGENT**

The name and the Florida street address of the registered agent are:

DIANE LEPINSKE
681 SE NORSEMAN DRIVE
PORT SAINT LUCIE, FLORIDA 34984

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 as provided for in Chapter 605, F.S.

x 

DIANE LEPINSKE / Registered Agent's signature

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PAGE 2 TRIPLE X CHARTERS, LLC

ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER

DIANE LEPINSKE

681 SE NORSEMAN DRIVE

PORT SAINT LUCIE, FLORIDA 34984

AUTHORIZED MEMBER

GERALD LEPINSKE JR.

681 SE NORSEMAN DRIVE

PORT SAINT LUCIE, FLORIDA 34984

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.....

x Diane Lepinske
DIANE LEPINSKE / Authorized Representative's signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

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