

L16000119381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

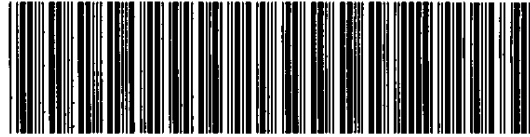
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/02/16--01025--008 **130.00

W16-33974

FILED
16 JUN 21 PM 4:50
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

06-24-13



June 17, 2016

Florida Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ATTN: Mr. Tim Burch
RE: Letter Number: 716A00009772

Dear Mr. Burch:

Please see attached changes to the Limited Liability Corporation set up for me and my associates by Ms. Karen Cummings. I would like you to process the check she sent with the changes to the company name, members, and addresses as indicated in the attached. Please note that we want to change the name from Tri-Group, LLC., to Tri-Group, LLC. JV. We have a FEI and Duns number already associated with the TRI Group name. I called your office and a colleague said that it should be ok.

Please feel free to call me or Ms. Cummings if you have any questions.

Sincerely yours,

TRI-Group, Joint Venture, LLC.

A handwritten signature in cursive script that reads "Keesa W. Gerald".

Managing Member

Attachments

cc: Ms. Karen Cummings
ATM

RECEIVED
16 JUN 21 AM 10:51
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 10, 2016

KAREN CUMMINGS
1334 WALNUT STREET
JACKSONVILLE, FL 32206

SUBJECT: TRI-GROUP, LLC ~~6/27~~
Ref. Number: W16000033974

We have received your document for TRI-GROUP, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II

Letter Number: 716A00009772

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~SV~~
~~Tri-Group LLC, JV~~ Tri-Group JV, 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 principal office of the Limited Liability Company is:

Principal Office Address:

1334 Walnut Street 14785 Old St. Augustine Rd
Jacksonville, FL 32206 Jacksonville FL
32258

Mailing Address:

1334 Walnut Street
Jacksonville, FL 32206

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual another business entity with an active Florida registration.)

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

Baker Klein Engineering, PL
Name

Karen Cummings

1334 Walnut Street

Florida street address (P.O. Box **NOT** acceptable)

<u>Jacksonville</u>	<u>FL</u>	<u>32206</u>
City	State	Zip

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.

[Signature]

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

~~Baker Klein Engineering, PL
1334 Walnut Street
Jacksonville, FL 32206~~

delete

MGR - Member

LG2 Environmental Solutions, Inc.
14785 Old St Augustine Road, Suite 4
Jacksonville, FL 32258

MGR member

Applied Technology & Management
411 Pablo Avenue
Jacksonville Beach, FL 32250

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16 JUN 21 PM 4:50
TALLAHASSEE FLORIDA

FILED

(Use attachment if necessary)

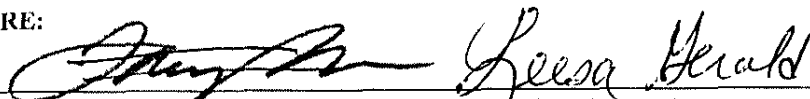
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

~~Tamara Baker~~

Leesa Gerald

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)