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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED,
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444
Attn: Tami Pershey

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

Email Address: marc@tracor.net

FLORIDA LIMITED LIABILITY CO.
Tricor US LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

Help

*Please note a Dissolution of Tricor US Corporation was
taken in earlier today. Please make sure that is filed
first so name is available. Thanks.*

File this with 1-31-17 effective date

Please see letter. Please obtain 1-31-17 filing date.

2/6/2017 2:31:55 PM
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Passley, Tami
2/3/2017 11:01:43 AM PAGE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 3, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LOWNDES, DROSDICK, DOSTER, KANTOR & REED

SUBJECT: TRICOR US LLC
REF: W17000010029

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.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is P17000008910.

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

Matthew T Moon
Regulatory Specialist II
New Filing Section

FAX Aud. #: H17000029660
Letter Number: 817A00002229

★ Please see attached letter &
obtain 1-31-17 filing date

P.O BOX 6327 - Tallahassee, Florida 32314



270 West New England Avenue
Winter Park, Florida 32789
Toll Free 1-866-4TRICOR
Phone (407) 629-2040
FAX (407) 629-5030

February 3, 2017

Registration Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Tricor US Corporation/Tricor US LLC

Dear Sir or Madam:

Please be advised that Articles of Dissolution to our Articles of Incorporation were filed with your offices on January 31, 2017. This letter confirms that we have no intention of revoking our Articles of Dissolution and hereby give our consent to the use of this similar name in the formation of Tricor US LLC.

Sincerely yours,

TRICOR US CORPORATION

By 

Name: Vivian Powers

Title: Executive Vice President

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
TRICOR US LLC
ARTICLE I - NAME

The name of this limited liability company is Tricor US LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The street address of the principal office and the mailing address of the Company is 270 West New England Avenue, Winter Park, Florida 32789.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is John D. Ruffier.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial manager of the Company is Marc L. Hagle, 270 West New England Avenue, Winter Park, Florida 32789.



John D. Ruffier, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.



John D. Ruffier

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