

# L18000221715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

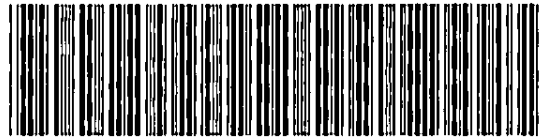
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500318703015

SEP 19 2018  
TALLAHASSEE

18 SEP 19 AM 9:48

SEP 19 2018

SEP 19 2018  
TALLAHASSEE

18 SEP 19 PM 4:17

M. MOON

SEP 20 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 397493 7383416

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : September 19, 2018

ORDER TIME : 3:59 PM

ORDER NO. : 397493-005

CUSTOMER NO: 7383416

FILED  
18 SEP 19 AM 9:43  
FBI - TAMPA

DOMESTIC FILING

NAME: TRIPOINT, LLC

EFFECTIVE DATE:

\_\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX \_\_\_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
TRIPOINT, LLC**

---

The undersigned authorized representative, desiring to form a limited liability company under the Florida Revised Limited Liability Company Act, hereby states the following:

1. The name of the limited liability company is:

TriPoint, LLC

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

215 Fifth Street, Suite 100  
West Palm Beach, Florida 33401

3. The name and street address of the limited liability company's initial registered agent are:

Corporation Service Company  
1201 Hays Street  
Tallahassee, Florida 32301

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated herein, I hereby accept the appointment as registered agent and agree to act in that 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.*

CORPORATION SERVICE COMPANY


By: Lydia Cohen  
Asst. Vice President

Title: \_\_\_\_\_



18 SEP 19 AM 9:44

IN WITNESS WHEREOF, the undersigned has duly executed these Articles of Organization on September 13, 2018.

  
JOHN S. DOWDS, Authorized Representative