Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H20000043652 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : KATZ BASKIES LLC Account Number : I20080000071

: (561)910-5700 Fax Number : (561)910-5701

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

FLORIDA LIMITED LIABILITY CO.

TRM Ventures II LLC

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

Electronic Filing Menu

Corporate Filing Menu

T. BURCH FEB 1 0 2020

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COVER LETTER

TO:	New Filling Sec Division of Cor				
SUBJEC		TURES II LLC			
SUBJE		Name of	Limited Liab	oility Company	
The encl	losed Articles of	Organization and fee(s) are submitt	ed for filing.	
Please re	turn all correspo	ondence concerning thi	s matter to th	e following:	
	Jeffrey A. B	askies			
			Name	of Person	
	Katz Baskie	s & Wolf PLLC			
			Firm/	Company	
	3020 North	Military Trail Suite 10	0		
			Ad	ldress	
	Boca Raton,	FL 33431			
			City/State	and Zip Code	
		katzbaskies.com	used for futur	e annual report notificat	ion)
Tan Saula				o maiori roport norman	,
ror turino	r intermation co	ncerning this matter, p	lease call:		
	Jeffrey A. Ba		561 t (910-5700)	
	Naп	oc of Person	Area Code	Daytime Telephon	e Number
Enclose	d is a check for t	he following amount:			
	.00 Filing Fee	□\$130.00 Filing Fe Certificate of Statu	s Cen	155.00 Filing Fee & lified Copy onal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ng Address		Street Address	
		iling Section		New Filing Section D The Centre of Tallah	
		on of Corporations Box 6327		2415 N. Monroe Stre	
		assee, FL 32314		Tallahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TRM VENTURES	II LLC					
(Must con	atin the words "Limited	Liability Company,	'L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street t	address of the principal o	ffice of the Limited	Liability Company is:			
Princip	pal Office Address:		Mailing Address:			
1899 Roval Palm W	'av	1899	Royal Palm Way			
Boca Raion, FL 334 ARTICLE III - Registered Ap	432 gent, Registered Office,	& Registered Ager	Raton, PL 33432 t's Signature:		201	
ARTICLE III - Registered Ag	gent, Registered Office, y cannot serve as its own active Florida registration	& Registered Agent. Yon.) 1 agent are: FPLLC Name	Raton, PL 33432	SECRETARY OF S LLAHASSEE, FI B	2020 FEB -7 AM 9:	Γ
ARTICLE III - Registered Ap (The Limited Liability Compan another business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered Katz Baskies & Wol	& Registered Agent. Yon.) I agent are: FPLLC Name Trail Suite 100	Raton, PL 33432 t's Signature: 'ou must designate an individual	ECRETAR LLAHASS	-7	

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 fumiliar with and accept the obligations of my position as perfected agent as provided for in Chapter 603, F.S..

(CONTINUED)

Rogistered Agent's Signature (REQUIRED)

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)

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Title:		Name and Address:
	ithorized Member	
"MGR" = Mar	ager	
MGR		Todd Roberti
		1899 Roval Palm Way
		Boca Raton, FL 33432
		
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		<u> </u>
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	nt if necessary)	
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