L2100028176Z

| (Requ | estor's Name) | | | | |
|---|-----------------|-------------|--|--|--|
| (Addre | ess) | | | | |
| (Addre | ess) | | | | |
| (City/S | State/Zip/Phone | e #) | | | |
| PICK-UP | MAIT | MAIL | | | |
| (Busir | ness Entity Nar | me) | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates | s of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Office Use Only



600368014906

06/21/21--01005--006 **125.00

2021 JULI 21 AH 11: 16

SECRETARY OF STATE FALLAHASSEE, FL

CORPORATE

When you need ACCESS to the world

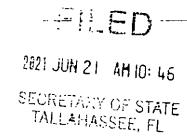
| ACCESS, |
|---------|
| INC. |

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

| PICK UP: | | K UP: | 6/21 DANNY | | | |
|------------------|--|-------------------|--------------|---|--------------|---------------|
| XX | CERTIFIED COPY PHOTOCOPY | | | | · | |
| | CUS | | | | | |
| xx | FILING | LLC | . <u>-</u> . | | <u></u> | |
| 1. | TRINKLE MOODY HO (CORPORATE NAME AND DOCUM | LDINGS MENT #) | , LLC | | | - |
| 2. | (CORPORATE NAME AND DOCUM | MENT#) | <u>_</u> | | | |
| 3. | (CORPORATE NAME AND DOCUM | MENT#) | | | · | |
| 1. | (CORPORATE NAME AND DOCUM | MENT#) | <u> </u> | | | |
| 5. | (CORPORATE NAME AND DOCUM | (ENT#) | | _ | | |
|). | (CORPORATE NAME AND DOCUM | IENT #) | | | | |
| SPECIAI NSTRU | L CTIONS: | 200 | | | - | - |



ARTICLES OF ORGANIZATION FOR TRINKLE MOODY HOLDINGS, LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I - NAME:

The name of the Limited Liability Company shall be: TRINKLE MOODY HOLDINGS, LLC (the "Company").

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

104 N Evers Street, Suite 202 Plant City, FL 33563

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is 104 N Evers Street, Suite 202, Plant City, Florida 33563, and the name of the registered agent at such address is Nate Kilton.

ARTICLE IV - MANAGEMENT:

The Company shall be managed by one or more Managers. The names and addresses of the initial Manager is:

Mark Shelton 104 N Evers Street, Suite 202 Plant City, FL 33563

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization this _____ day of _______, 2021. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Mark Shelton, Organized

SECRETARY OF S

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:

TRINKLE MOODY HOLDINGS, LLC

The name and address of the registered agent and office is:

Nate Kilton 104 N Evers Street, Suite 202

Plant City, FL 33563

Mark Shelton, Organizer

DATE

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.

ار از

DATE