

L24000279451

Florida Department of State
Division of Corporations
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((H24000214267 3)))



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

From: Account Name : HARROD PROPERTIES INC.
Account Number : I2020000020
Phone : (813)229-1500
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: John@jaffetilchin.com

2024-05-20 11:54:48

FLORIDA LIMITED LIABILITY CO.
Troncoso Group of Virginia LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$125.00 |

Facsimile Audit Number: H24000214267 3

6/20/2024

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

Troncoso Group of Virginia LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - ADDRESS

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

Troncoso Group of Virginia LLC
305 Eastleigh Dr
Belleair, FL 33756

Troncoso Group of Virginia LLC
305 Eastleigh Dr
Belleair, FL 33756

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:
(THE LIMITED LIABILITY COMPANY CANNOT SERVE AS ITS OWN REGISTERED AGENT.)

THE NAME AND THE FLORIDA STREET ADDRESS OF THE REGISTERED AGENT ARE:

John Troncoso
305 Eastleigh Dr
Belleair, FL 33756

2024 JUN 20 PM 5:49

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..



REGISTERED AGENT'S SIGNATURE (REQUIRED)

(CONTINUED)

ARTICLE IV - NAME AND ADDRESS OF THOSE AUTHORIZED TO MANAGE AND CONTROL THE LLC.

| <u>TITLE:</u> "MGR"=MANAGER "AR" = AUTHORIZED REPRESENTATIVE | <u>NAME AND ADDRESS:</u> |
|--|---|
| MGR | John Troncoso 305 Eastleigh Dr Belleair, FL 33756 |
| | |
| | |
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| | |
| | |

2024 JUN 20 12:51:09

ARTICLE V - EFFECTIVE DATE, IF OTHER THAN THE DATE OF THIS FILING:

(OPTIONAL)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 91) (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.

John Troncoso
TYPE OR PRINTED NAME OF SIGNEE

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