

Kim@Dover

L020000005156

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE:
(Sub Account) _____

DATE: 3-5

REQUESTOR NAME: Lexis Document Services

ADDRESS: _____

TELEPHONE: (____) (____) ext. (____)

CONTACT NAME: _____

CORPORATION NAME: Rio Barcelona Holdings, LLC

DOCUMENT NUMBER:
(if applicable) \$21500

200005043522--9

AUTHORIZATION: C. Woodyard
Cynthia J. Woodyard

☒ CERTIFIED COPY (1-9) Need 3 certified copies please.
☐ CERTIFICATE OF STATUS (1-9)
☐ PLAIN STAMPED COPY

☐ Call When Ready
☐ Walk In
☐ Mail Out

☐ Call if Problem
☐ Will Wait

☐ After 4:30
☐ Pick Up

APPROVED
AND
FILED

02 MAR -5 AM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JB
3-5-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Rio Barcelona Holdings, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

P.O. Box 8689, Incline Village, NV 89452

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Lexis Document Services
3953 W.W. Kelley Rd.
Tallahassee FL 32311
City, State, and Zip

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 608, F.S..

C. Woodlyard, as agent
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 MAR - 5 AM 11:25

APPROVED
AND
FILED

(An additional article must be added if an effective date is requested)

Tom Gonzales

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Tom Gonzales, Member
Typed or printed name of signer

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)