JAMES	CETNAR Requester's Name CORNORANT Address Address Address Phone #	DR, 904- 260-4215	SECRETARY OF STATE OF JUN 20 AN IO: 22 Office Use Only mown):
CORPORATIO	N NAME(S) & DOCU	MENT NUMBER(S), (if k	nown): 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
2.	Corporation Name)	(Document #)	02 JUN 20
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3	Corporation Name)	(Document #)	
4((Corporation Name)	(Document #)	
Walk in	Pick up time _		Certified Copy
☐ Mail out	Will wait	☐ Photocopy	☐ Certificate of Status
NEW FILINGS Profit Not for Pro Limited Lia Domesticat Other	fit ibility	AMENDMENTS Amendment Resignation of R.A Change of Register Dissolution/Withdra Merger	ed Agent
OTHER FILIN	<u>IGS</u>	REGISTRATION/QU	ALIFICATION
Annual Rep Fictitious N		☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	· · · · · · · · · · · · · · · · · · ·
			Evaminar's Initials 10

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: RANTEC ENTER,	prises, LL	C
The name of the Limited Liability Company is.		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited L	iability Company	y is:
12372 CORMORANT DRI		
JACKSONVILLE, Fl. 32223		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent	's Signatureচ	SEO
The name and the Florida street address of the registered agent are:	JUN 20	ON OF
JAMES F. CETNAR Name		82F
Name		유명 양국
Florida street address (P.O. Box NOT acceptable) JACKSONVILE FL 32223 City, State, and Zip	N-1	TATE
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply we statutes relating to the proper and complete performance of my duties, and I deacept the obligations of my position as registered agent as provided for in Complete performance.	with the provision am familiar with a	s of all
Registered Agent's Signature		
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or manager or manager - managed company.	iore managers an	d is,
(An additional article must be added if an effective date is		·
Signature of a member or an authorized representative of a n	nember.	-
(In accordance with section 608.408(3), Florida Statutes, the excordance of this document constitutes an affirmation under the penalties of that the facts stated herein are true.)	ecution f perjury	

Filing Fees:

F. CETWAR
Typed or printed name of signee

\$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)