10400006115

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		102
		1 John
	Office Use Only	100



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SEURIASSEE, FLORIO.

TRANSMITTAL LETTER

	ration Section on of Corporations				
SUBJECT:	Redden Business Services	s, LLC.			
oobulei	(Name of Limi	ited Liability Company)	_		
The enclosed	Articles of Organization and fe	e(s) are submitted for filing.			
Please return	all correspondence concerning	this matter to the following:			
Joseph M. I	Redden		- Committee		
	(Name of Person)		SEULA	r 10	
Redden Bus	siness Services, LLC		HASSI)4 JAN 20 AM II: 30	
	(Firm/Company)				
			FLORID]: 30	
4622 S.W.	7th Ave.);	_	
	(Address)				
Cape Coral	, FL 33914				
	(City/State and Zip Code)				
For further in	formation concerning this matte	er, please call:			
Joseph M. I	Redden	at (239) 945-1527	_		
	(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET AD		MAILING ADDRESS:			
	Registration Section Registration Section Division of Corporations Division of Corporations				
	409 E. Gaines Street P.O. Box 6327				

Tallahassee, Florida 32399

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: REDDEN BUSINESS SERVICES, LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
4622 SW 7TH AVE.	4622 SW 7TH AVE.	
CAPE CORAL, FL 33914	CAPE CORAL, FL 33914	
0.4 E 0014 (E, 7 E 00014		

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

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

Joseph M. Redden	E.
Name	ELA Ot
4622 SW 7TH AVE.	JAN 2
Florida street address (P.O. Box NOT acceptable)	20 SSE
CAPE CORAL FL 33914	m _c
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.

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	•
manager	Joseph M. Redden
	4622 SW 7th Ave.
	Cape Coral, FL 33914
	Leave M Dadden
	Joseph M. Redden
	AHASSEE FLO
	\$35 835 835 835 835 835 835 835 835 835 8
	30
(Use attachment if necessary)	
,	
NOTE: An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	
,	$\alpha = \alpha = \alpha$
(Jour M Kedden 01/13/04
Signature of a	member or an authorized representative of a member.
(In accordance	V e with section 608.408(3), Florida Statutes, the execution
of this docume	ent constitutes an affirmation under the penalties of perjury stated herein are true.)
	Joseph M. Redden
	Typed or printed name of signee
	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)