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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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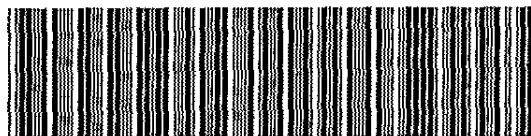
(Business Entity Name)

(Document Number)

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04 MAY -6 AM 11:10

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Rv Jo Properties I, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John William Bowling Jr  
(Name of Person)

Rv Jo Properties I, LLC  
(Firm/Company)

11167 Tug Gray Rd.  
(Address)

Tallahassee, Florida 32317  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bill Bowling at 850, 431-7815  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Ru Jo Properties I, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

11167 Teng Grove Rd.  
Tallahassee, Fla. 32317

**Mailing Address:**

11167 Teng Grove Rd.  
Tallahassee, Fla.  
32317

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

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

John William Bowling Jr.  
Name  
11167 Teng Grove Rd.  
Florida street address (P.O. Box **NOT** acceptable)  
Tallahassee FLORIDA 32317  
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, Florida Statutes.

John William Bowling Jr.  
Registered Agent's Signature

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**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

MGRM

MGRM

**Name and Address:**

John William Baul JA  
11167 Tug Lane Rd  
Tallahassee, Florida 32311

Suzanne M Baul JA  
11167 Tug Lane Rd  
Tallahassee, Florida 32311

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

John William Baul JA  
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.)

John William Baul JA  
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)

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