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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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CORPORATE		·	· · · · · · · · · · · · · · · · · · ·	
\ ACCESS, \	236 East 6th Aver ox 37066 (32315-7066) ~	ue . Tallahassee, Flo	rida 32303 完设	· 美二
INC. P.O. B	ox 37066 (32315-7066) ~	(850) 222-2666 or (	800) ९६९-१६६६ झ	(854) 222-1666.
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Remoo Leasing LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company 1
4630 Harbor Village Blvd. Unit 1507
Ponce Inlet, FL 32127

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

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

Janet B. Mashburn

Name

4630 Harbor Village Blvd. Unit 1507

Florida street address (P.O. Box NOT acceptable)

Ponce Inlet

FL 32127

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

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

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 perjuty that the facts stated herein are true.)

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

## 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		
MGRM	Janet B. Mashburn	
	4630 Harbor Village Blvd. Unit 1507 Ponce Inlet, FL 32127	
	Alvin L. Mashburn	
	4630 Harbor Village Blvd Unit 1507 Ponce Inlet, FL 32127	
(Use attachment if necessary)		
NOTE: An additional article must	be added if an effective date is requested.	
REQUIRED SIGNATURE:		
sant b.	Mahleurn	
	authorized representative of a member.	

\$100.00 Filing Per for Articles of Organization

- \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

(in accordance with section 608.408(5), Fronthe Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee