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(Re	equestor's Name)	
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PICK-UP	☐ WART	MAIL
(88	usiness Entity Name)
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

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TO: Registration Section Division of Corporations		
SUBJECT: RAY MOND MEDTA, 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:		
Stanley R. Raymond III		
RayMOND MEDIA, LLC		
4639 Crystal Avenue	00 JU	-11
Savasota F1 3423 (City/State and Zip Code)	L 16 PM	
For further information concerning this matter, please call:	12:37 SIAIDA	
Stanley R. Raymond TT at (941) 921-3716 (Name of Person) (Area Code & Daytime Telephone Number)	JA –	

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
RAYMOND MEDIA,	LLC
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4639 Crystal Avenue Sarasota, FL 34231	4639 Crystal Avenue Sarasota, FL 34231
Sarasota, FL 34231	Sarasota, FL 34231
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered Stan by R. Raymond Name 4039 Crus fal Avan Florida street address (P.O. Box No. Savaso fa, Florida, State, and Zip	d agent are: OH JUL 16 PM ARY OF

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..

Registered Agent's Signature

Page 1 of 2 (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		
"MGR"	Starley R. Raymond III 4039 (rystal Avenue Sarasofa FL 34231	
(MARK		
MUTE	Stan Raymond SR. 3241 Bayou Sound	
	Longboat Key, FL 34228	
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(Use attachment if necessary)		
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NOTE: An additional article must	be added if an effective date is requested:	1-1
REQUIRED SIGNATURE:	SS To	:2200000
	ET.	7
John Car	1.1	Actions of
Signature of a member or as	a withorized representative of a member.	Samuel P.
(In accordance with section 6 of this document constitutes a that the facts stated herein are	08.408(3), Florida Statutes, the execution in affirmation under the penalties of perjury	
Stanley R. K	PaumonD III	
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)