2:04 AUG-9 P 2:5,3

SECRETARY OF STATE TALLAHASSEE. FLORIDA (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies ____ Certificates of Status_ Special Instructions to Filing Officer: MA .

Office Use Only



800039860908

08/09/04--01055--011 **125.00

TRANSMITTAL LETTER

то:	Registration Section Division of Corporations			FILED	
SUBJ		R Proper Limited Liability Compan		Q4 AUG -9 P 2: 5 CRETARY OF STATI LAHASSEE, FLORIC	
The er	aclosed Articles of Organization and fee(s)) are submitted for filing.			
	Please return all corresp	condence concerning this	matter to the followi	ng:	
	Kathern	(Name of Person)	ighan		
	RMTB P	roperties (Firm/Company)	LLC mem	iber of CC	Proper
	P.O. Bo	0X 2524 (Address)			· = · · - · · ···
	Lovelar	City/State and Zip Code)	892	39	st Ŧ
For fu	rther information concerning this matter, p	please call:			
· · · · · · · · · · · · · · · · · · ·	Katherine Callag	han at (970) (Area Code &	635-945 Daytime Telephone N	18 Jumber)	м г .

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

FILED

2005

FLORIDA LIMITED LIABILITY COMPANY

A DOMENT E Y AT	2804 AUG -9 P 2: 53				
ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA				
TBMR Properties LLC	TALLAHASSEE, FLORIDA				
ARTICLE II - Address: The mailing address and street address of the principal office of the Lir	nited Liability Company is:				
Principal Office Address: Mailing Add	ress:				
163 Greenwood Drive P.O.	BOX 2524				
Loveland, CO 80537 Lovela	nd, Co. 80539				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:					
Joseph Cece					
Florida street address (P.O. Box NOT acceptable)					
Sebastian FLORIDA 32958 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.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Manager The name and address of each Manager	ing Member(s): or Managing Member is as follows ED
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address 2004 AUG -9 P 2: 53 SECRETARY OF STATE TALLAHASSEE FLORIDA RMTB Properties
	163 Greenwood Drive Loveland, Co. 8053
(Use attachment if necessary)	
NOTE: An additional article must be REQUIRED SIGNATURE:	e added if an effective date is requested.
· / V	authorized representative of a member. 8.408(3), Florida Statutes, the execution
	affirmation under the penalties of perjury rue.)

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)