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SECTION PROV

THE LAW OFFICES OF KIRK D. EICHOLTZ, P.A.

2202 N. West Shore Blvd. Suite 200 Tampa, FL 33607 (813) 639-7500 FAX (813) 639-7584 E-Mail: kirkeicholtz@msn.com

December 9, 2004

State of Florida Registration Section Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

RE: Rudamite Properties, LLC

To Whom It May Concern:

Enclosed please find the following documents:

- Transmittal Letters and Articles of Registration (two original copies)
- Check \$160.00

Please return one certified copy to address show above.

Sincerely,

Kirk D. Eicholtz

Enclosure

201 NEC 10 P 4: 04

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Rudamite Properties, LLC (Name of Limited	i Liability Company)	_
The enclosed Articles of Organization and fee(s) are su	ibmitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Kirk D. Eicholtz, Esquire		
(1)	Name of Person)	-
The Law Office of Mick D. Clababe D. A.		
The Law Offices of Kirk D. Eicholtz, P.A.	Firm/Company)	
·	• • •	
2202 North West Shore Boulevard, Suit	e 200	
	(Address)	200 DEC 10
Tampa, FL 33607		
(City/	State and Zip Code)	P # 04
		provide majorine de de
For further information concerning this matter, please of	call:	01
	at (813) 639-7583	
" (Name of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status	☐_\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section	MAILING A	ection
Division of Corporations 409 E. Gaines Street Tallahassee, Fiorida 32399	Division of Co P.O. Box 632 Tallahassee, F	7 -

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Rudamite Properties, LLC		
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is	
Principal Office Address:	Mailing Address:	
2202 North West Shore Boulevard	2202 North West Shore Boulevard	
Suite 125	Suite 125	
Tampa, FL 33607	Tampa, FL 33607	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re Kirk D. Eicholtz	200	
Name		
2202 North West Shore Boulev	yard, Suite 200	
Florida street add	ress (P.O. Box NOT acceptable)	
Tampa	FL 33607 C	
City, State, a	nd Zip	
II - in a bound and an employer of an employer	recent service of process for the above stated limiter	

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 positioners registered agent as provided for in Chapter 608, F.S..

Registeres 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:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Ronald Ruffner 2202 North West Shore Boulevard, Suite 125		
·	Tampa, FL 33607		
-			
	* · ·		
e e e e e e e e e e e e e e e e e e e			
(Use attachment if necessary)	endi 		
NOTE: An additional article must l	be added if an effective date is requested.		
REQUIRED SIGNATURE:			
Par (NO BOCH : :		
Signature of a member	or an authorized representative of a member.		
	tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury erein are true.)		
Ronald Ruffner			
Тур	ed or printed name of signee		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)