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(Re	questor's Name)	
(Ad	dress)	
<i>y</i>	u.000)	
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer:	
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TRANSMITTAL LETTER

Registration Section

TO:

Division of Corporations		
SUBJECT: RS LAKELAND LLC		
	d Liability Company)	
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Lee Burdman		
	Name of Person)	
c/o Redstone Investme	ents	
	Firm/Company)	
5050 Belmont Avenue		
	(Address)	
Youngstown, OH 4456	05	
(City.	/State and Zip Code)	
For further information concerning this matter, please	call:	
Lee Burdman	at (330) 759-4000	
(Name of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street	MAILING A Registration S Division of Co P.O. Box 632	ection orporations

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
RS Lakeland LLC	<u></u>	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
c/o Redstone Investments 5050 Belmont Avenue	c/o Redstone Investments5050 Belmont Avenue	
Youngstown, OH 44505	Youngstown, OH 44505	
The name and the Florida street address of the CT Corporation System	red Office, & Registered Agent's Signature: ne registered agent are:	
Na	me	
1200 South Pine Island Road		
Florida street	address (P.O. Box NOT acceptable)	
Plantation	FL 33324	
City, Sta	te, and Zip	
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S	

Susan J. Metze
Assistant Secretary

(CONTINUED)

Page 1 of 2

05 MAY 18 PM 2: 2:

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	r	
MGR	Lee Burdman	
	5685 Engleton Lane	
	Girard, OH 44420	
MGR	Jonathan A. Levy	
	40 Redfern Drive	
	Youngstown, OH 44505	
MGR	Paul Schertz	
	7510 N. Mobley Road	
	Odessa, FL 33556	
towards and Oak ward	to the Orlean	
Jonathan Schwartz	Jonathan Schwartz	
	11729 Lake Key Drive	
	Odessa, FL 33556	
(Use attachment if necessary)		
•		
NOTE: An additional article	must be added if an effective date is requested.	
REQUIRED SIGNATURE:	4	
	12. 1 222 4 22	
	Marran	
Signature of a i	member or an authorized representative of a member.	
of this documen	with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)	
Leo	e Burdman	
	Typed 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)