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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		· -
SUBJECT: Rancho del Rey L (Name of Limited	LLC	DIN ALLAHASSEE, FLORIDA
(Name of Limited	d Liability Company)	F. C. F.
		是公 2
The enclosed Articles of Organization and fee(s) are st	ubmitted for filing.	NSSET NOW
Please return all correspondence concerning this matte	r to the following:	500
		6E
Tye Roy		36
(1	Name of Person)	7
(I	Firm/Company)	
	-	
7.0. Box 433		
1.0. 150 2 4 5 5	(Address)	
Original NC 200	. 7 ,	
Oriental NC 285	State and Zin Code)	
(Oily)	state and exp code;	
For further information concerning this matter, please	call:	
Tye Roy (Name of Person)	at (252) 249-2	2092
(Name of Person)	at (252) 249-2 (Area Code & Daytime To	elephone Number)
	•	•
England is a short for the Collegeing amount.		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee	☐ \$155.00 Filing Fee &	□ \$160.00 Filing Fee.
Certificate of Status	Certified Copy	Certificate of Status &
	(additional copy is enclosed)	Certified Copy
		(additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, F	Torida 32314

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Rancho del Rey, LLC	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
411 Walnut St. #2409 Grean Cove Springs FL 32043	Attn: Tye Roy 411 Walnut St #2409 Green Cove Spring: FL 32043
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	gistered agent are:
Tye Roy Name	
411 Walnut St. # Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)

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

City, State, and Zip

(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 MGRM (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: 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 perjury that the facts stated herein are true.) Typed or printed name of signee

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\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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