

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : I20020000094 Phone : (770)777-2091

Fax Number : (770)220-1943

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CONFORATION

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

RED RIVER, LLC

Certificate of Status	0
Certified Copy]
Page Count	02
Estimated Charge	\$155.00

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the I	Limited Liability Comp	any is:	
Red River, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company			
1115 Marbella Plaz	za Drive	1115 Marbella Plaza Drive	
Tampa, Florida 33	619	Tempa, Florida 33619	
		istered Office, & Registered Agent's Signature: of the registered agent are:	
	NRAI Services, Inc.		
		Name	
	2731 Executive Park D	rive, Suite 4	
	Florida street addi	ress (P.O. Box <u>NOT</u> acceptable)	
	Weston	FLORIDA 33331	
	City	State and 7in	

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..

NRAI Services, Inc.

Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: We man and Address:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Parker Investments, Inc.	
	1115 Marbella Plaza Drive	
	Tampa, Florida 33619	
(Use attachment if necessary)		
NOTE: An additional article must be	e added if an effective date is requested.	
REQUIRED SIGNATURE:		
~ Ocal	Mr. Clair	
Signature of a member or in :	sutherized representative of a member.	
(In accordance with section 608 of this document constitutes an that the facts stated herein are to	3.408(3), Florida Statutes, the execution affirmation under the penalties of perjury rue.)	
	T. McClain	
Typed or pr	rinted name of signee	

Filing Fees: 5100.00 Filing Fee for Articles of Organization 5 25.00 Designation of Registered Agent

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

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