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TALLAHASSEE, FLORIDA

M. HODGES

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: R.M. MARTIN, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRIS CADENHEAD

(Name of Person)

CHRIS CADENHEAD, ATTORNEY AT LAW

(Firm/Company)

420 EAST PINE AVENUE

(Address)

CRESTVIEW, FLORIDA 32539

(City/State and Zip Code)

For further information concerning this matter, please call: CHRIS CADENHEAD
ATTENTION: CINDY HUGHES

CINDY HUGHES

(Name of Person)

at (

850

) 682-6165

(Area Code & Daytime Telephone 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)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I: Name: The name of the Limited Liability Company is:

R. M. MARTIN, LLC

ARTICLE II: Address: The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

200 W. Cane Avenue
Crestview, Florida 32536

Mailing Address:

P. O. Box 625
Baker, Florida 32531

ARTICLE III: Registered Agent, Registered Office & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an Individual or other business entity with an active Florida registration.)

The name of the Florida street address of the registered agent are:

ROBERT MARTIN
Registered Agent
200 W. Cane Avenue
Crestview, Florida 32536

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..



ROBERT MARTIN
Registered Agent's Signature

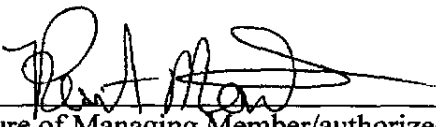
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV: Managing Members:

The name and address of each Managing member is as follows:

Title:	Name and Address:
Managing Member	Robert Martin, authorized signor/representative 200 W. Cane Avenue Crestview, Florida 32536
Managing Member	Roxanne Martin, as authorized signor 200 W. Cane Avenue Crestview, Florida 32536

ARTICLE V: Effective date shall be the date of filing.



Signature of Managing Member/authorized signor/representative
ROBERT MARTIN

(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.)