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# 07 FEB -8 AM 9:41

#### **COVER LETTER**

Division of Co				
SUBJECT: Re	d Train Enterp	orises, LLC		
	(Name of Limite	d Liability Company)		•
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	condence concerning this matte	er to the following:		
B	-yan D. Moyer	Name of Person)		
		(Firm/Company)		····
3	712 Malec Cir	cle		
		(Address)		
S	urasota, FL 3	(Address)  4233  /State and Zip Code)		
	(City	/State and Zip Code)		ZΩ
For further information concerning this matter, please call:				Secretary of <b>State</b> Fallahassee, Fl <b>orid</b>
Bryan D. Moyer at (941) 927-3634 (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for	or the following amount:			ADA
▼\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Stat Certified Copy (additional copy is en	us &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clipton Building 2661 Executive Center Tallahassee, FL 32301	ns	

### FILED

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

ARTICLE I - Name:

The name of the Limited Liability Company is	s:
Red Train Enterprises, L (Must end with the words "Limited Liability Company, "Lim	LC
(Musi end with the words   Linked Lizbility Company, Em	med Company of their aboveviation LLC, or L.C., j
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3712 Malec Circle Sarasota, FL 34233	3712 Malec Circle
Sarasota, FL 34233	Sarasotu, FL 34233
Florida street a	ed Office, & Registered Agent's Signature SECRETARY OF STATE ARE STATE OF S
Having been named as registered agent and to	accept service of process for the above stated limited

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

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

(CONTINUED) Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Bryan D. Moyer  3712 Malec Circle  Sarasota, FL 34233	
	O7 FEB SECRETALIAN	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the	-8 AM S	<u> </u>
	e specific and cannot be more than five business days prior	

#### **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.)

Bryan D. Moyer
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)