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PICK-UP W	AIT MAIL	
. (Business En	tity Name)	
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02/14/07--01006--012 **160.00

COVER LETTER

TO:

Registration Section

Division of Corporations The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & \$160.00 Filing Fee, □ \$155.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RLT + RF B (Must end with the words "Limited Liability Company, "Limited		C., ")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability	y Company is:
Principal Office Address:	Mailing Address:	
25941 HICKORY BLUD#1	SAME	
BONITA SPRINGE FI		_ .
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re	Exorey Blo #1	07 FEB I 4 AH II: OC SECRETARY OF STATE TALLAHASSEE, FLORIDA
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable) FL 34/34 nd Zip	HII: 00 F STATE FLORIDA
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	his certificate, I hereby accept the app v. I further agree to comply with the p	ointment as rovisions of all

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRW - Wallaging Member	TOKET F. BUAKELEY 25941 HICKORY KUN #1
MBRM	BONITA Springs FL 34134 RONALD L. SORDAN
	ENITA SOLUBS FL 34/34
	O7 FEB 14 AH SEGRETARY OF TALLIAHASSEE, F
	AH II: 00
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the last an effective date is listed, the date must to or 90 days after the date of filing.)	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
o or 50 days after the date of filing.)	
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

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)