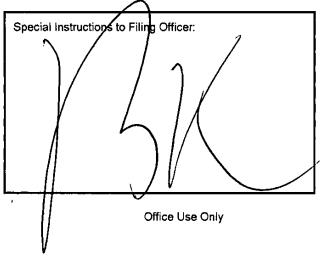
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(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
tand tand tand
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status





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SECRETARY OF STATE
SECRET

DEPARTICAL SESTAT VISION OF CORPORATI TALLAHASSEE, FLORI

RECEIVED

COVER LETTER

TO: Registration Section	
TO: Registration Section Division of Corporations SUBJECT: Ranchito of Gads den UC (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:	
SUBJECT: Fl Ranchito of Gadsden LLC o	
(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:	C
Ran Bentield	>
(Name of Person)	
V	
(Firm/Company)	
58 Sidux Circle	
(Address)	
58 Sidux Circle (Address) Howana, FT 32333	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Ron Bentield at 850, 539-5171	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee	
Certificate of Status Certified Copy Certificate of Status &	
(additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address Street/Courier Address	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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:	2 1
El Ranch to of Gads den LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.)	A TO
ARTICLE II - Address:	05.55 8: 15
The mailing address and street address of the principal office of the Limited Liability Co	ompany is:
Principal Office Address: Mailing Address:	Y
1834 W Jefferson St 1834 W Jefferson o Dwincy, A 32351 Dwincy, A 32351	<i>57</i> -
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatu (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anot business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	
Ron Benfield	
Name	
58 Sidux Circle	
Florida street address (P.O. Box NOT acceptable)	
Havana FL 32333	
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above statiliability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the provistatutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 60	ment as sions of all with and
for Bfld	
Registered Agent's Signature (REQUIRED)	

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MORM	Blanca Tejada 1834 W Jufferson St Duincy, A 323.7
(Use attachment if necessary)	
LE V: Effective date, if other	than the date of filing: (OPTIC must be specific and cannot be more than five business
, G	
REQUIRED SIGNATURE:	a BHO seember of a member.

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)