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# COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	ECT: RLTCORP Properties, I	LLC.				
		ited Liability Comp	any)			
The en	nclosed Articles of Organization and fee(s) are	e submitted for filin	g.			
Please	return all correspondence concerning this ma	atter to the following	\$:			
	Raymond L. Trainor					
		(Name of Person)				
	RLTCORP Properties, LLC.					
	(Firm/Company)					
	4121 Kimberly Circle					
	(Address)					
	Tallahassee, FL 32309					
	(C	ity/State and Zip Cod	e)			
For fu	rther information concerning this matter, pleas	se call:				
Raymond L. Trainor		_at ( 850	980-2513			
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)			
Enclos	sed is a check for the following amount:					
<b>]</b> \$125.	.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}	\$155.00 Filir Certified Co (additional cop	py Certificate of Status &			
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exc	ourier Address ion Section of Corporations suilding coutive Center Circle			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
RLTCORP Properties, LLC.		
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
RLTCORP Properties, LLC.	RLTCORP Properties, LLC.	
4121 Kimberly Circle	4121 Kimberly Circle	
Tallahassee, FL 32309	Tallahassee, FL 32309	
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 another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:		
Raymond L. Trainor		
Name	里 <sup>(-1)</sup>	
4121 Kimberly Circle		
Florida street addre	ess (P.O. Box NOT acceptable)	
Tallahassee,	<sub>FL</sub> 32309	
City, State, and	d Zip	
liability company at the place designated in thi registered agent and agree to act in this capacity, statutes relating to the proper and complete perf	cept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S	

Registered Agent's Signature (REQUIRED)

(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:

<u>Title:</u> "MGR" = Manager	Name and Address:	Name and Address:	
"MGRM" = Managing Member	r		
MGRM	Raymond L. Trainor		
	4121 Kimberly Circle		
	Tallahassee, FL 32309		
MGRM	Richard L. Trainor		
	1708 Mulberry Lake Drive		
	Dacula, GA 30019		
MGRM	Theresa F. Trainor		
	4121 Kimberly Circle		
	Tallahassee, FL 32309		
MGRM	Cheryl L. Trainor		
	1708 Mulberry Lake Drive		
	Dacula, GA 30019		

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/1/2007 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 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.)

Raymond L. Trainor

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)