

L080000015267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300117593023

02/11/08--01034--020 **160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 11 PM 4:20

J. BRYAN

FEB 12 2008

EXAMINER

LAW OFFICES OF
STROMIRE, BISTLINE & MINICLIER
AN ASSOCIATION OF PROFESSIONAL ASSOCIATIONS

1037 PATHFINDER WAY
SUITE #150
ROCKLEDGE, FLORIDA 32955

HAROLD T. BISTLINE, P.A.
JOSEPH E. MINICLIER, P.A.
LEON STROMIRE
1931-2001

E-MAIL: sbmmglaw@aol.com
FAX: (321) 636-1170
PHONE: (321) 639-0505

February 8, 2008

FLORIDA DEPARTMENT OF STATE
Division Of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Renegade Underground, LLC

Ladies and Gentlemen:

Enclosed please find the following documents:

1. Two copies of the Articles Of Organization For Florida Limited Liability Company for Renegade Underground, LLC.
2. Cover Letter.
3. My trust account check #7333 payable to Florida Department Of State in the amount of \$160.00 representing the filing fee, certificate of status and certified copy charges.

Very truly yours,



Harold T. Bistline
HTB/anr
Enclosures

Copy to: Tom Goodson

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 11 PM 4:29

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Renegade Underground, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

630 Cidco Road
Cocoa, FL 32926

Mailing Address:

630 Cidco Road
Cocoa, FL 32926

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:

Tom Goodson

Name

630 Cidco Road

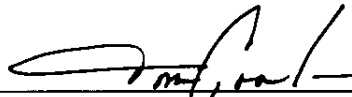
Florida street address (P.O. Box **NOT** acceptable)

Cocoa, FL 32926

FL

City, State, and Zip

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.



Registered Agent's Signature (REQUIRED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 11 PM 4:20

(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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Tom Goodson

630 Cidco Road

Cocoa, FL 32926


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 11 PM 4:20

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)

Tom Goodson

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)