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(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	···
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DIVISION OF LOCALLY

COVER LETTER

TO:	Registration Division of C			
SUBJI	The R	led Train Emporiu	m LLC	
(Name of Limited Liability Company)				
The en	alaged Artisles	of Organization and fee(s) are	and mitted for filing	
			•	
Please	return all corres	pondence concerning this ma	iter to the following:	
	Donna To	ot Merritt		
			(Name of Person)	
	The Red	Train Emporium L	LC	
			(Firm/Company)	_
	5644 E M	larina Dr		
			(Address)	_
	Fort Laud	lerdale, Fl. 33312		
			ty/State and Zip Code)	
For fur	ther information	concerning this matter, pleas	e call:	
Don	na Toot M	erritt	at (954) 254-6216	
	(Nam	e of Person)	(Area Code & Daytime Telephone Number)	
Enclos	sed is a check f	or the following amount:		
□ \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address 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 Compa	any is:	
The Red Train Emporium LLC		
(Must end with the words "Limite	ed 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	s:
Principal Office Address:	Mailing Address:	
5644 E Marina Dr	5644 E Marina Dr	
Fort Lauderdale, Fl. 33312	Fort Lauderdale, Fl. 33312	
	—	

Florida street address (P.O. Box <u>NOT</u> acceptable)
Fort Lauderdale, Fl. 33312

5644 E Marina Dr

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)

(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>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Donna Toot Merritt
· · · · · · · · · · · · · · · · · · ·	5644 E Marina Dr
	Fort Lauderdale, Fl. 33312
-	

(Use attachment if necessary)	
ICLE V: Effective date, if other than	the date of filing: (OPTIONAL)
n effective date is listed, the date mu 90 days after the date of filing.)	st be specific and cannot be more than five business days
90 days after the date of fullig.)	
REQUIRED SIGNATURE:	·
Signature of a me	moder or an authorized representative of a member.
of this document c	h section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ted herein are true.
DONN	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)

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)