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G. MCLEOD

APR 28 2009

EXAMINER



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04/24/09--01020--013 **125.00

09 APR 24 PM 1:

COVER LETTER

Division of Co		
_{SUBJECT:} Relation	onship Marketing	Resources, LLC
		ted Liability Company)
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.
Please return all corresp	ondence concerning this ma	tter to the following:
Paul V Sm	nith	
		(Name of Person)
Relationsh	nip Marketing Res	sources, LLC
		(Firm/Company)
955 SW B	aya Drive	
		(Address)
Lake City,	Florida 32025	
	(Ci	ty/State and Zip Code)
For further information of	concerning this matter, pleas	e call:
Michael M Darby		at 386 754-5093
(Name of Person)		(Area Code & Daytime Telephone Number)
Enclosed is a check fo	r the following amount:	
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy 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 Company is:	
Relationship Marketing Resources,	LLC
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
955 SW Baya Drive Lake City, Florida 32025	955 SW Baya Drive Lake City, Florida 32025
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Michael M Darby Name	24 P
955 SW Baya Drive	

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..

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

Registered Agent's Signature (REQUIRED)

Lake City, Florida 32025 City, State, and Zip

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 Membe	er en
MGRM	Paul V Smith
	955 SW Baya Drive
	Lake City, Florida 32025
MGRM	Michael M Darby
	955 SW Baya Drive
	Lake City, Florida 32025
(Use attachment if necessary)	
ICLE V. Effortiva data if other t	han the date of filing: (OPTIONAL)
	must be specific and cannot be more than five business days prior
90 days after the date of filing.)	must be specific and cannot be more than five business days prior
o days after the date of fining.)	
REQUIRED SIGNATURE:	
	a hill
/ <u>/</u>	
est de la companya de	
Signature of a	member or an authorized representative of a member.
(In accordance	with section 608.408(3), Florida Statutes, the execution
(In accordance of this docume	with section 608.408(3), Florida Statutes, the execution on the constitutes an affirmation under the penalties of perjury
(In accordance of this docume that the facts	with section 608.408(3), Florida Statutes, the execution

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)