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C. LEWIS

NOV 32009

EXAMINER

COVER LETTER

TO:	Registration Division of C				
SUBJI	ECT:	Relentles	s Dev	elopment, L.L.	C.,
		Name of Limi	ted Liabili	ty Company	
The en	closed Articles	of Organization and fee(s) are	submitted	l for filing	
		spondence concerning this ma		-	
		M	1athias		
			Name of	Person	
		Relentles	s Devel	opment, L.L.C.,	
			Firm/Co	npany	
		18126	Sandy I	Pointe Drive	
			Addr	ess	
		Ta	ampa, F	1 33647	
		Ci	ty/State and	l Zip Code	
		mathia E-mail address: (to be used	asjudd@ for future a	Dyahoo.com	n)
For fur	ther information	concerning this matter, pleas		•	,
	Math	nias D Judd	at (727 ₎	504-4981
	 	e of Person		Area Code & Daytime	
Enclos	sed is a check t	for the following amount:			
_		\$130.00 Filing Fee & Certificate of Status	Cert	.00 Filing Fee & ified Copy tional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Pagistration Section		Street/Courier Addr	250
		Registration Section Division of Corporations		Registration Section Division of Corporati	ions
		P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Cent	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:	
	•	
Relentless Dev	elopment, L.L.C., t Liability Company," "L.L.C.," or "LLC.	
(Must end with the words "Limited	t Liability Company," "L.L.C.," or "LLC	")
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
18126 Sandy Pointe Drive	18126 Sandy Pointe I	Orive
Tampa, Fl 33647	Tampa, Fl 33647	
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Ag Registered Agent. You must designate at	n individual or another
The name and the Florida street address of	the registered agent are:	FILE FILE
Math	nias D Judd	题了
	Name	SSE N
18126 Sa	ndy Pointe Drive	PH 1:46 EE. FLORID
Florida street address	(P.O. Box NOT acceptable)	COAD -
Tampa	FL	
City, S	tate, and Zip	~
Having been named as registered agent ar	nd to accept service of process fo	r the above stated limited

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

FILED

		ger or Managing Member is as follows:	OI
<u>Title:</u> "MGR" = Manag	er er	Name and Address:	SECRETARY OF TALLAHASSEE.
"MGRM" = Man			IMPERMI
MGR		Mathias D Judd	
		18126 Sandy Pointe Drive	
		Tampa, Fl 33647	
MGRM	-	Davy Campos	<u>.</u>
		420 79th Terrace N, #110	
		St.Petersburg, Fl.33702	· · · · · · · · · · · · · · · · · · ·
MGRM		Rollin Covell	
		13335 Boca Ciega Avenue	
		Madeira Beach Fl. 33708	· · · · · · · · · · · · · · · · · · ·
	_		
	if necessary)		
Use attachment i	• /		
(Use attachment i	• •	e date of filing:	. (OPTIONAL)
LE V: Effective of	date, if other than the	e date of filing: be specific and cannot be more than five	
LE V: Effective of fective date is list	date, if other than the ted, the date must bute of filing.)		
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LE V: Effective (lective date is list days after the da	date, if other than the ted, the date must be te of filing.) GNATURE: Signature of a member (In accordance with se	er or an authorized representative of a memberation 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of per	e business days pr
LE V: Effective (lective date is list days after the da	date, if other than the ted, the date must be te of filing.) GNATURE: Signature of a member of this document constitute that the facts stated he	er or an authorized representative of a memberation 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of per	e business days pr

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)