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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Name	<u> </u>
(Dx	ocument Number)	
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T. CLINE
FEB - 4 2011
EXAMINER

COVER LETTER

· TO:	Registration Section Division of Corporations	
SUBJE	Brian Ridenour "LLC."	
	Name of Limited Liability Company	
The en	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
,	Brian Ridenour	
	Name of Person	
	Brian Ridenow "LLC." Firm/Company	
,	Firm/Company	
	10115 Bud Rhoden Road Address	
	Palmetto FL 34221 City/State and Zip Code bridenour 93 @ Yahoo, Com E-mail address: (to be used for future annual report notification)	
•	City/State and Zip Code	
_	bridenour 93 @ yahoo, com	
	E-mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
Br	name of Person at (941) 807-9002 Name of Person Area Code & Daytime Telephone Number 773	
	Name of Person Area Code & Daytime Telephone Number	
Enclos	Name of Person Area Code & Daytime Telephone Number Area Code & Dayt	I ;
\$125.00	Filing Fee \$\sum \\$130.00 Filing Fee & \sum \\$155.00 Filing Fee & \sum \\$160.00 Filing Fee,	7-77-
	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy	3.# . ***********************************
	(additional copy is enclosed) (additional copy is enclosed)	4,
	Mailing Address Street/Courier Address Pasietation Section	
	Registration Section Registration Section Division of Corporations Division of Corporations	
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	
	Tallahassee, FL 32314 2001 Executive Center Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Brian Ridenour "LL	<u> </u>
(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:
10115 Bud Rhoden Road Palmetto FL 34221	54me
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
Brian Ridenay	
Name	
10115 Bud Rho Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Palmetto FL City, State	FL 34221 e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept 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 The (REQUIRED)
(CONTINU	ED)

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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Brian Ridenaur 10115 Bud Rhoden Rd Palmetto, FL 34221
(Use attachment if necessary)	
	e date of filing: $\frac{\partial}{\partial x} = \frac{1}{1} = \frac{1}{1}$. (OPTIONAL)
effective date is listed, the date must 100 days after the date of filing.) REQUIRED SIGNATURE:	
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REQUIRED SIGNATURE: Signature of a member	Decror an authorized representative of a member. 28.408(3), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true. It is provided for in a document to the Department of State my as provided for in s.817.155, F.S.) 2. denour Typed or printed name of signee
REQUIRED SIGNATURE: Signature of a member	be specific and cannot be more than five business days proceed to be specific and cannot be more than five business days proceed to be specific and cannot be more than five business days proceed to be specific and submitted of a member. Os. 408(3), Florida Statutes, the execution of this document ler the penalties of perjury that the facts stated herein are true. It is a provided for in a document to the Department of State may as provided for in s. 817.155, F.S.) Order or printed name of signee
REQUIRED SIGNATURE: Signature of a member	be specific and cannot be more than five business days proceed by the control of the company of