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CRETARY OF STATE ON OF CORPORATIONS

T. HAMPTON
MAY 8 1 2011

EXAMINER

COVER LETTER

Division of Co	rporations			
_{subject:} Radle	Consulting Servi	ces, LLC		
		d Liability Company	Ÿ	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.		
Please return all corresp	ondence concerning this matt	er to the following:		
Jason A.	Radle			
<u> </u>	Tadio	Name of Person		
Radle Co	nsulting Services	s. LLC		
.		Firm/Company		
651 Baco	n Street			
		Address		
Cocoa, FL	32926			
		/State and Zip Code		
jradle15@g				
	E-mail address: (to be used f	or future annual report	notification)	
For further information	concerning this matter, please	call:		
Jason A. Radle		at (321) 604-0007		
Name	of Person	Area Code &	Daytime Tele	phone Number
Enclosed is a check for	or the following amount:			
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Copy (additional copy is	,	\$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	Registration Division of Clifton Bui	Corporations Iding Itive Center (

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability (Company is:
Radle Consulting Serv	ices, LLC
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addr	ress of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
651 Bacon Street	651 Bacon Street
Cocoa, FL 32926	Cocoa, FL 32926
Jason A. Rad	
	Name
651 Bacor	n Street
Flo	orida street address (P.O. Box <u>NOT</u> acceptable)
Cocoa,	_{FL} 32926
	City, State, and Zip
TT	

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

11 MAY 27 AM III: OK

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Memb	per
MGR	Jason A. Radle
	651 Bacon Street
	Cocoa, FL 32926

(Use attachment if necessary)	l e e e e e e e e e e e e e e e e e e e
ARTICLE V: Effective date, if other	than the date of filing: Date of filing (OPTIONAL)
	must be specific and cannot be more than five business days prior
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jason A. Radle

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)

Page 2 of 2