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(Re	equestor's Name)	
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D. BRUCE

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EXAMINER

COVER LETTER

Registration Section

Division of Corporations

TO:

SURJECT: R&V	Olson Company					
		ed Liability Compa	iny		•	
The enclosed Articles of	Organization and fee(s) are	submitted for filing	;.			
Please return all correspo	ndence concerning this matt	er to the following	:			
<u>Victoria O</u>	Ison					
		Name of Person	-	·		
R & V Ols	on Company, LL	.C				
	· · · · · · · · ·	Firm/Company				
3611 Gard	len Lakes Ivy					
		Address				
Bradenton,	FL 34203			Y4		
	·	//State and Zip Code	· - · · · · · · · · · · · · · · · · · ·	ALL		
olsonvictoria				<u>₽</u> à		insie:
	E-mail address: (to be used f	_	rt notification)	ASS	25	
For further information co	oncerning this matter, please	call:		£, E, €		
Victoria Olson		at (847	702-9946	FLO	<u>-</u>	C
Name of	Person	Area Code	& Daytime Tele	phone Number	2	
Enclosed is a check for	the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	by	\$160.00 Filing Certificate of Sta Certified Copy (additional copy is a	atus &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton Bu	of Corporations			

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

R & V Olson Company,		
(Must end with the words "	'Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
3611 Garden Lakes Ivy Bradenton, FL 34203	3611 Garden Lakes Ivy Bradenton, FL 34203	
	,	ual or another
Victoria Olson	1	L 25 IASS
	Name	
3611 Gard	en Lakes Ivy	FEST ST
	rida street address (P.O. Box <u>NOT</u> acceptable)	U 4: 21 STATE FLORIDA
Bradenton	_{FL} 34203	A
	City, State, and Zip	
liability company at the place desi registered agent and agree to act in t statutes relating to the proper and c	gent and to accept service of process for the acignated in this certificate, I hereby accept the this capacity. I further agree to comply with the complete performance of my duties, and I aming the provided for in Ch	appointment as the provisions of all familiar with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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

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

			<u>Na</u>	me and	<u>Address:</u>			
	= Manager							
"MGRM	" = Managin	ng Member						
MGR			Vic	toria Olso	n			
-			36	11 Garden	Lakes Ivy			
			Bra	denton, F	L 34203			
MGR			Ro	dney M. C	Olson			
			36	11 Garder	n Lakes Ivy			
				adenton, F				
			-					
-								
								-
						•••		
							-	
(1)44-	-1							
(Use atta	chment if ne	cessary)						
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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)