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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(613, 611.012.1)	
PICK-UP WAIT MAIL	
(During Frakk Marry)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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A. LUNT	ļ
AUG 17 2011	
EXAMINER	

Office Use Only



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COVER LETTER

	ation Section of Corporations		
SUBJECT:	RTMF LLC		
	Name of I.	imited Liability Company	
The enclosed Art	icles of Organization and fee(s)	are submitted for filing.	
Please return all o	correspondence concerning this	matter to the following:	
	Robert H. Murp	hy & Tina C. Murphy	
		Name of Person	
		RTMF LLC	
-		Firm/Company	
	1301 West Ga	rden Street	
	1741 BESE VA	Address	₹. 2
	Pensaco	la, FL 32501	2011 AUG SECRET PALLAMA
		City/State and Zip Code	AS A
	ngc496	4@gmail.com	ARY ASSE
	E-mail address: (to be u	sed for future annual report notification)	# @ #
For further inform	nation concerning this matter, p	lease call:	STATIE LORID
Willian	n H. Bass	a(_850_)_434-58	199
	Name of Person	Area Code & Duytime Tele	ephone Number
Enclosed is a ch	eck for the following amount cc \$130.00 Fiting Fee & Certificate of Status	2	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailing Address</u> Registration Section Division of Computition	Street/Courier Address Registration Section	_

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	mpany is:
RTMF LLC	
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1301 West Garden St.	1301 West Garden St.
Pensacola, FL 32501	Pensacola, FL 32501
The second secon	
the name and the Florida street address with an active Florida street address with an active Florida street address with a street ad	ss of the registered agent are: AHARY OF STARY
liability company at the place design registered agent and agree to act in the statutes relating to the proper and accept the obligations of my position.	ent and to accept service of process for the above stated limited equated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all omplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S ent's Signature (REQUIRED)

(CONTINUED)

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:

	= Manager " = Managing Member	Name and Address:
MGR	······································	Robert H. Murphy 4964 Highway 90, Suite A Pace, FL 32571
MGRM	·	Robert H. Murphy 4964 Highway 90, Suitera Pace, FL 32571 HATE
		- FOR
		
LE V: Ei ffective da days afte	chment if necessary) Tective date, if other thate is listed, the date may refer the date of filing.)	an the date of filing: (OPTIONAl nust be specific and cannot be more than five business days
LE V: Ei ffective da days afte	fective date, if other thate is listed, the date mer the date of filing.)	tust be specific and cannot be more than five business days H. Musa
LE V: Ei ffective da days afte	fective date, if other thate is listed, the date may rethe date of filling.) ED SIGNATURE: Signature of a magnetic constitutes an affirmation I am aware that any fulse	tust be specific and cannot be more than five business days H. Musa

Filing Feer:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)