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(Re	equestor's Name)	
, (A	ddress)	
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(C	ity/State/Zip/Phone	⇒#)
PICK-UP	WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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J. SAULSBERRY EXAMINER OCT 26 2011

COVER LETTER

Registration Section
Division of Corporations

SUR	Randall Online Ventures, LLC			
	Name of Limited Liability Company			
I he e	inclosed Articles of Organization and fee(s) are submitted for filing.			
Pleas	e return all correspondence concerning this matter to the following:			
ti.	Deborah J. Randall			
	Name of Person			
	Randall Online Ventures, LLC			
	Firm/Company	<u></u>		
13. W.	2899 NW 24th Way	SEC	2811 OCT 25	
	Address	* 7 7 7 2 7 7 1 * 2 1 1		***
	Boca Raton, FL 33431	155 155 155 155 155 155 155 155 155 155	25	
	City/State and Zip Code	<u> 10</u>	Ì	****
	motts12353@aol.com		လ ထ	£ 44
	E-mail address: (to be used for future annual report notification)	ਤੇਜ਼ਹ ≽	F	
For fi	urther information concerning this matter, please call:			
Deb	oorah J. Randall 37 37 561 3488-9730			
	Name of Person Area Code & Daytime Telephone Number			
Enclo	osed is a check for the following amount:			
3125.0	00 Filing Fee \$\bigs\square\$130.00 Filing Fee & \$\bigs\square\$\$\$ Certificate of Status \$\bigs\square\$\$ Certified Copy \$\bigs\square\$\$ Certificate of Status \$\bigs\square\$\$\$	-		
	(additional copy is enclosed) Certified Co	ру		
	(additional cop	y is elic.	iosea)	
	Mailing Address Street/Courier Address			
7	Registration Section Registration Section Division of Corporations Division of Corporations			
が 5 5	P.O. Box 6327 Clifton Building			
))	Tallahassee, FL 32314 2661 Executive Center Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited	Liability Company is:				
Randall Online \	Ventures, LLC				
(Must end w	with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:	:				
The mailing address and	street address of the pri	ncipal office of the Limited Liab	oility Con	npany	is:
Principal Office Addres	<u>ss:</u>	Mailing Address:			
2899 NW 24th Way		2899 NW 24th Way			
Boca Raton, FL 33431		Boca Raton, FL 33431			
<u>å</u>					
ADTICLE III Dogisto	rad Agant Dagistarad	Office, & Registered Agent's S	Sideature	హ	
(The Limited Liability Company	cannot serve as its own Registe	ered Agent. You must designate an individu		 ·	
business entity with an active Fl	orida registration.)		AH AH	C7	T
The name and the Florida	a street address of the re	egistered agent are:	ARY	25	1
Deb	orah J. Randall		<u> </u>	**	
	Name		SS	ထဲ	in products to the party
289	9 NW 24th Wa	эу	ADA ADA	8: 24	
	Florida street add	ress (P.O. Box NOT acceptable)			
Boca	Raton	_{FL} 33431			
.	City, Sta	te, and Zip			

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 Sanature (REQUIRED)

(CONTINUED)

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

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

40714	
1GRM	Deborah J. Randall
	2899 NW 24th Way
	Boca Raton, FL 33431
<u> </u>	
Use attachment if necessary)	
: •	
	he date of filing: (OP'I
ective date is listed, the date must lays after the date of filing.)	t be specific and cannot be more than five busine

<u>KEQUIRED</u> 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.)

Deborah J. Randall

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)