(Requestor's Name)
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PICK-UP WAIT MAIL
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EXAMINER

COVER LETTER

`TO: '	· ·	on Section Corporations	
SUBJE	7СТ•	Cardinal Res	sources, LLC
30101			d Liability Company
The en	closed Article	es of Organization and fee(s) are s	ubmitted for filing.
Please	return all corr	respondence concerning this matte	er to the following:
		·	rd Feldman Name of Person
			ranc of reison
			Firm/Company
		16 Norcro	oss St., Suite 50-B
			Address
		Roswe	ell, GA 30075
		City	/State and Zip Code
_			chard@ yahoo.com or future annual report notification)
For fur	ther informati	ion concerning this matter, please	•
7 OF TOTAL			•
		nrd Feldman	at (561) 703-9060 Area Code & Daytime Telephone Number
	Na	me of reison	Area Code de Daytime Perephone Palmoer
Enclos	ed is a checl	k for the following amount:	
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Compa	nu io
The name of the Emitted Liability Compa	ily is.
Cardinal Page	vurone IIC
Cardinal Reso	d Liability Company, "L.L.C.," or "LLC.")
(what end with the words Limite	the black of the b
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
16120 N. Nebraska Ave.	16 Norcross St., Suite 50-B
Lutz, FL 33549	Roswell, GA 30075
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its ow	n Registered Agent. You must designate an individual or another
business entity with an active Florida registration.)	
The name and the Florida street address o	f the registered agent are:
Louis D.	Badenhorst
	Name
16120 N	. Nebraska Ave.
Florida st	reet address (P.O. Box NOT acceptable)
Lutz	_{FL} 33549
	City, State, and Zip
Having been named as registered agent a	and to accept service of process for the above stated limited
liability company at the place designat	ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all
statutes relating to the proper and comp	elete performance of my duties, and I am familiar with and
accept the obligations of my position s	s registered agent as provided for in Chapter 608, F.S.
(\mathcal{X}
	Jackhart E
Registered Agent's	s Signature (REOLIRED)

(CONTINUED)

Page 1 of 2

ESFECTIVE DATE 02/01/12

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

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

MGRM	Louis D. Badenhorst
	16120 N. Nebraska Ave.
	Lutz, FL 33549
MGRM	Richard Feldman
	16 Norcross St., Suite 50-B
	Roswell, GA 30075
(Use attachment if necessary)	
LE V: Effective date, if other than t fective date is listed, the date must	the date of filing: February 1, 2012 (OPTIO

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.)

Richard Feldman

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)