

L12000046765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

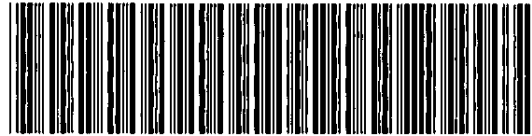
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

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2012 APR -4 AM 9:36
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

J. BRYAN

APR -5 2012

EXAMINER

TO: Registration Section
Division of Corporations

SUBJECT: RL Murphy, LLC

The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Blake Hayward
Hayward & Grant, P.A.
2121-G Killarney Way
Tallahassee, FL 32309

E-mail address (to be used for future annual report notification): blakehayward@haywardgrant.com

For further information concerning this matter, please call:

Blake Hayward at (850) 386-4400

Enclosed is a check for the following amount: \$125.00 Filing Fee

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

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLES OF ORGANIZATION
OF
RL MURPHY, LLC
ARTICLE I - NAME

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name of the limited liability company is RL MURPHY, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company are:

Principal Office Address:
1609 Alligator Drive
Alligator Point, FL 32346

Mailing Address:
1609 Alligator Drive
Alligator Point, FL 32346

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Robert M. Murphy
1609 Alligator Drive
Alligator Point, FL 32346

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.


Robert M. Murphy

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

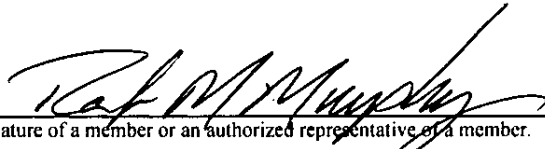
"MGMR" = Managing Member

Name and Address:

MGR

Robert M. Murphy
1609 Alligator Drive
Alligator Point, FL 32346

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.)

Robert M. Murphy

Typed or printed name of signee

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