L12000115492

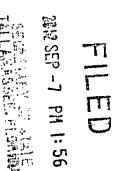
(F	Requestor's Name)
(/	Address)
(/	Address)
0)	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
J)	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

Office Use Only



700239131907

09/07/12--01023---023 **160.00



J. BRYAN

SEP 1 0 2012

EXAMINER

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT:	FREERIDE836		
SCERECT.	Name of L	imited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed	d Articles of Organization and fee(s)	are submitted for filing.	
Please return	all correspondence concerning this	matter to the following:	
Ma	ark Phillips Russell		
1410	ark i miiips i kusseii	Name of Person	· · · · · · · · · · · · · · · · · · ·
			.
		Firm/Company	
10	53 East Highland Driv	e	9 =
	oo East i nginana Biiv	Address	
1 -1.	alama El 22042		P : 51
Lake	eland, FL, 33813	City/State and Zip Code	
Free	eRide836@gmail.com		
	E-mail address: (to be u	sed for future annual report notification)	
For further in	nformation concerning this matter, p	lease call:	
Mark Phi	illips Russell	at (863) 255-1982	
	Name of Person	at (OOS) 255-1962 Area Code & Daytime Telep	phone Number
5) 1:			
	a check for the following amoun		a .
\$125.00 Filir	ng Fee\$130,00 Filing Fee & Certificate of Status		\$160.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section Division of Corporation	Registration Section ons Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

FREERIDE836 LLC

(Must end with the words "Limited Liability Company, "L.J..C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
1053 East Highland Drive	1053 East Highland Drive
Lakeland, FL 33813	Lakeland, FL 33813
	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Mark Phil	lips Russell
	Name
1053 Ea	ast Highland Drive
	Florida street address (P.O. Box NOT acceptable)
Lakeland	_{FL} 33813
	City, State, 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 Signature (REOUIRED)

(CONTINUED)

Title: "MGR" = Manager "MGRN" = Manager	Inanging Member(s): Inager or Managing Member is as follows: Name and Address: Mark Phillips Russell 1053 East Highland Drive
"MGRM" = Managing Member	
MGRM	Mark Phillips Russell
	1053 East Highland Drive
	Lakeland, FL 33813
MGRM	Tracey Lynn Russell
	1053 East Highland Drive
	Lakeland, FL 33813
	· · · · · · · · · · · · · · · · · · ·
Use attachment if necessary)	
• •	
LE V: Effective date, if other than	the date of filing: (OPTION
LE V: Effective date, if other than fective date is listed, the date must	the date of filing: (OPTION st be specific and cannot be more than five business dates
LE V: Effective date, if other than fective date is listed, the date must	the date of filing: (OPTION st be specific and cannot be more than five business dates
LE V: Effective date, if other than fective date is listed, the date must	the date of filing: (OPTION st be specific and cannot be more than five business da
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)	the date of filing: (OPTION st be specific and cannot be more than five business dates
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)	the date of filing: (OPTION st be specific and cannot be more than five business da
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	st be specific and cannot be more than five business da
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Man	st be specific and cannot be more than five business di
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Man	st be specific and cannot be more than five business d
fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation used that any false in the days are that any false in the days after the days are that any false in the days after the date must be days after the date must be days after the date of filing.)	st be specific and cannot be more than five business da L Phillips Runell

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)