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SECRETARY OF STATE

APR 1 0 2013 T. HAMPTON (850) 245-6051.

# **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	LH CONSULT	ING, LLC	
SUBSECT.	Name of Limit	ed Liability Company	
The enclosed Articles of	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
	ROBERT L.	HOLDREDGE Name of Person	
		Name of Person	
	RLH CONS	SULTING Firm/Company	
		Firm/Company	
	3457 LE	ENOX MILL R	OAD
		Address	
	TALLAHASS	FL 3230 y/State and Zip Code www.my, fsu.ed for future annual report notification)	9
	Cit	y/State and Zip Code	
	Y{hø9@ <b>#</b>	tomy, foured	и
<del></del>	E-mail address: (to be used to	for future annual report notification)	·
For further information	concerning this matter, please	call:	
Bob How	REDGE	at (850) 509 Area Code & Daytime Telep	-82.88
Name	of Person	Area Code & Daytime Telep	phone Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
·	Mailing Address Registration Section	Street/Courier Address Registration Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

4 of 6

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

RLH CONSULTING, LLC.

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

### **ARTICLE II - Address:**

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

Mailing Address:

1 Illicipal Office Address.	Maning Address.
3457 LENOX MILL RD.	3457 LENDX MILL RD,
TALLAHASSEE, FL 32309	TALLAHASEE, FL 32309

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:

ROBERT L. HOLDREDGE

Name

3457 LENOX MILL RD

Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE FL 3230 9

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 APR - 0 AMIN: 37

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Memb <del>e</del> r	
MGR	ROBERT L. HOLDREDGE 3457 LENDX MILL RD. TALLAHASSEE, FL 32309
\	
(Use attachment if necessary)	
	ate of filing: (OPTIONAL) be specific and cannot be more than five business days

### REQUIRED SIGNATURE:

(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.)

## 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)

Page 2 of 2