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FILED

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: _Rhino Financial, LLC_
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Rich Young
Name of Person

Rhino Financial, LLC
Firm/Company

27 Clarendon Ct. N.
Address

Palm Coast, FL 32137
City/State and Zip Code

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

For further information concerning this matter, please call:

Rich Young at (_757_) _574-7424_
Name of Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒$125.00 Filing Fee   ☐$130.00 Filing Fee &   ☐$155.00 Filing Fee &   ☐ $160.00 Filing Fee.
                         Certificate of Status   Certified Copy   Certificate of Status &
                                                   (additional copy is enclosed)   Certified Copy
                                                                              (additional copy is enclosed)

Mailing Address   **Street/Courier Address**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                               Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Rhino Financial LLC

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

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

27 Clarendon Ct. N.
Palm Coast, FL 32137

Mailing Address:

27 Clarendon Ct. N
Palm Coast, FL 32137

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:

Rich Young
Name

27 Clarendon Ct. N
Florida street address (P.O. Box **NOT** acceptable)

Palm Coast, FL _32137_
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)

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 Member

MGR   *Rich Young*
                                            27 Clarendon Ct. N.
                                            Palm Coast, FL 32137

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: *1/1/2014* . (OPTIONAL.)
**(If an effective date is listed, the date must be specific and cannot be more than five business days
prior to or 90 days after the date of filing.)**

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.)

Rich Young

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)**