

Division Oct. 28. 2013 10:36AM

STONE & GERKEN, P.A.

https://No. 2045 P. 2 izo. P. 2 ipts/efilcovr.exe

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : STONE AND GERKEN, P.A.
Account Number : I20090000097
Phone : (352) 357-0330
Fax Number : (352) 357-2474

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: logan@sohbylogan.com

FLORIDA LIMITED LIABILITY CO.

RLW Holdings, LLC

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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EXAMINE

OCT 29 2013

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* * * COMMUNICATION RESULT REPORT (OCT. 24. 2013 4:15PM) * * *

FAX HEADER 1: STONE & GERKEN, P. A.
FAX HEADER 2:

TRANSMITTED/STORED : OCT. 24. 2013 3:54PM

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Division of Corporations

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Email Address: logan.eskthyllogan.com**FLORIDA LIMITED LIABILITY CO.****RLW Holdings, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$153.00

850-245-6030

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**ARTICLES OF ORGANIZATION
OF
RLW HOLDINGS, LLC**

**ARTICLE I
NAME**

The name of this Limited Liability Company is RLW HOLDINGS, LLC.

**ARTICLE II
DURATION**

This limited liability company shall have a perpetual existence commencing on the date these Articles are filed with the Secretary of State for the State of Florida, unless sooner terminated as provided herein.

**ARTICLE III
PURPOSE**

This limited liability company is created for the purpose of transacting all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act as agreed upon by the members.

**ARTICLE IV
PLACE OF BUSINESS AND REGISTERED AGENT**

The principal place of business of this limited liability company shall be 19708 E. Altoona Road, Altoona, Florida 32702, or such other place or places as the members from time to time may determine.

The mailing address of this limited liability company shall be Post Office Box 1774, Mount Dora, Florida 32756.

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The initial Registered Agent of this limited liability company shall be Robert Logan Wilson, 19708 E. Altoona Road, Altoona, Florida 32702.

**ARTICLE V
MANAGEMENT OF THE BUSINESS**

This limited liability company shall be a manager-managed company. The initial manager shall be Robert Logan Wilson whose address is 19708 E. Altoona Road, Altoona, Florida 32702. Such manager shall continue to manage this limited liability company until a qualified successor is duly elected by a majority of members.


**ARTICLE VI
PROPERTY**

Real or personal property originally brought into or transferred to the Company, or acquired by the Company by purchase or otherwise, shall be held and owned, and conveyance shall be made, in the name of this limited liability company.

**ARTICLE VII
AMENDMENTS**

These Articles, except for the vested rights of the members, may be amended from time to time by a two-thirds (2/3) majority in interest of the members, and the amendments shall be filed with the Florida Department of State.

IN WITNESS WHEREOF, the parties hereto have executed these Articles of Organization on this 24 day of October, 2013.


Robert Logan Wilson, Manager

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STATE OF FLORIDA
COUNTY OF LAKE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Robert Logan Wilson, who produced Florida Driver's License as identification or is personally known to me, and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 24 day of October, 2013.

NOTARY PUBLIC

Jaret Whitney
Notary Public Printed Name

My Commission Expires:

Feb 21 2016



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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR SERVICE OF PROCESS WITHIN THIS STATE,
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.**

In pursuance of Chapter 48.091, Florida Statutes, the following
is submitted, in compliance with said Act:

First - that **RLW HOLDINGS, LLC**, desiring to organize under the
laws of the State of Florida with its principal office, as indicated
in the Articles of Organization, at the City of Altoona, County of
Lake, State of Florida, has named **ROBERT LOGAN WILSON**, of 19708 E.
Altoona Road, Altoona, Florida 32702, as its agent to accept service
of process within this State.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above
stated Company, at the place designated in this certificate, I hereby
accept to act in this capacity, and agree to comply with the
provisions of said Act relative to keeping open said offices.

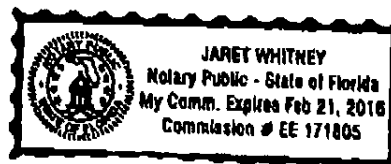


Robert Logan Wilson, Registered Agent

Sworn to and subscribed before
me this 24 day of October,
2013 by Robert Logan Wilson.

NOTARY PUBLIC

My Commission Expires: Feb 21 2016



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JARET WHITNEY
NOTARY PUBLIC
STATE OF FLORIDA

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