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FLORIDA LIMITED LIABILITY CO.

Ray Green Consulting LLC

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FAX AUDIT # H130002525173

**ARTICLES OF ORGANIZATION
OF
Ray Green Consulting LLC**

ARTICLE I NAME

The name of the limited liability company shall be: Ray Green Consulting LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
4350 Pablo Professional Ct, Jacksonville, Florida 32224.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Marshall D. Gunn, Jr., 4350 Pablo Professional Ct, Jacksonville, Florida 32224. Located in the County of Duval.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the managing members and the name and address of the member of the Limited Liability Company is:
Raymond Green, PO Box 13, Tallahassee, Florida 32302-0013



Date: November 13, 2013

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

608-827-5300

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2013 NOV 14 AM 10:12
STATE
4350 PABLO
JACKSONVILLE
FL 32224

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

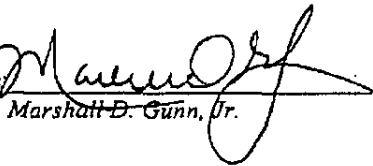
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Ray Green Consulting LLC

The name and address of the registered agent and office is Marshall D. Gunn, Jr., 4350 Pablo
Professional Ct, Jacksonville, Florida 32224. Located in the County of Duval.

Having been named as registered agent and to accept service of process for the above stated
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.

Signature


Marshall D. Gunn, Jr.

Date:

11/13/13

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STATE OF FLORIDA

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