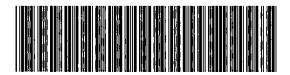
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PICK-UP	☐ WAIT	MAIL	
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SECRELARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corpora			
SUВЛ	ect: Ro	Name of Limit	CAM LLC ed Liability Company	
The en	closed Articles of Organ	nization and fee(s) are s	submitted for filing.	
Please	return all corresponden	ce concerning this matt	er to the following:	
	Regin	a Bart	Name of Person	
	Schu	ute + C	O. CPA'S Firm/Company	
	Low S.	Clevelar	d. Massillon	Ra
	Fair	lawn, O	H 44333 y/State and Zip Code	
			CPa Comport notification)	
For fur	ther information concern			
R	egina Bar Name of Perso	420	at (330) 670-C Area Code & Daytime Telep	
N .		following amount: 30.00 Filing Fee & rtificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Div	illing Address istration Section ision of Corporations	Street/Courier Address Registration Section Division of Corporations	

Tallahassee, FL 32314

Clifton Building 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:				
Rouanzion CAM 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:				
Principal Office Address:	Mailing Address:			
1110 Pinellas Bayway # 212	600 S. Cleve-Mass Rd.			
Tierra Verde FL 33715	Fairlawn, OH 44333			
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: Tierra Verde Property Management Name Name Florida street address (P.O. Box NOT acceptable) Tierra Verde FL 33715 City, State, and Zip				
liability company at the place designated in the registered agent and agree to act in this capact all statutes relating to the proper and complete	concept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of experformance of my duties, and I am familiar with gistered agent as provided for in Chapter 608, F.S			

(CONTINUED)

Page 1 of 2

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MBR	Susan Rouanzion 1110 Anelias Bayway # 212 Tierra Verde, FL 33715
MATERIA DE LA CONTRACTOR DE LA CONTRACTO	
(Use attachment if necessary)	θ)
•	ne date of filing: 2013 (OPTIONAL) st be specific and cannot be more than five business days

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certifled Copy (Optional)

\$ 5.00 Certificate of Status (Optional)