## #1400062988

(Re	equestor's Name)	
bA)	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200258280452

04/16/14--01019--004 \*\*125.00

014 APR 16 PM 4:40
SLCRETARY OF STATE
ALL AHASSEF, FLORIET

, saly

K.SALY EXAMINER APR 17 2014

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Rvan A. King LLC		
Name of Li	mited Liability Company	
The enclosed Articles of Organization and feets) a	re submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Ryan A. King		
	Name of Person	
	Firm/Company	
129 Center St.	Address	<u>.</u>
	Address	
Oak Hill, FL 32759	City/State and Zip Code	
rvanaking86@gmail.com	d for future annual report notifies	ution)
For further information concerning this matter, ple	ase call:	
	386 ) 868-7795	
Name of Person	Area Code Daytime Te	Iephone Number
Enclosed is a check for the following amount:		
☑ \$125.00 Filing Fee ☐\$130.00 Filing Fee & Certificate 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)
Mailing Address	Street/Courier Add Registration Section	<u>ress</u>
Registration Section Division of Corporations	Division of Corpora	tions
P.O. Box 6327 Tallahassee FL 32314	Clifton Building 2661 Executive Cen	tor Circlo

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	ame:		
The name of the	Limited Liability Co	mpany is:	
Ryan A. King L	LC.		PC F
	(Must end with t	the words "Limited	d Liability Company, "L.L.C.," or "LLC.")
			是是 6
ARTICLE II - A		a at the principal a	office of the Limited Liability Company is:
The maning addi	ress and street addres	ss of the principal o	white of the familied Enabling Company is.
Principal Office	e Address:		Mailing Address:
129 Center St.			129 Center St.
Oak Hill FL			Oak Hill FL
32759			32759
	s entity with an active e Florida street addre <u>Ryan A. Kin</u> g	ess of the registered	d agent are:
		Name	2
	129 Center		
	Florida stree	t address (P.O. Bo	x <u>NOT</u> acceptable)
	Oak Hill		FL 32759
		City	Zip
the place des	signated in this certific	cate, I hereby accep	ervice of process for the above stated limited liability company at pt the appointment as registered agent and agree to act in this to fall statutes relating to the proper and complete performance

(CONTINUED)
Page 1 of 2

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Ryan A. King
	129 Center St.
	Oak Hill, FL 32759
Use attachment if necessary)	
tive date is listed, the date must be spec	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 9
ctive date is listed, the date must be spec f filing.)	
ctive date is listed, the date must be spec f filing.)	
etive date is listed, the date must be spec f filing.) E VI: Other provisions, it any.	
REQUIRED SIGNATURE:	cific and cannot be more than five business days prior to or 9
REQUIRED SIGNATURE:	cific and cannot be more than five business days prior to or so
REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605	nber or an authorized representative of a member.
ctive date is listed, the date must be specifiling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men  (In accordance with section 605 constitutes an affirmation under	nber or an authorized representative of a member.  .0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
ctive date is listed, the date must be specifiling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men  (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member.  .0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State
ctive date is listed, the date must be specifiling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	nber or an authorized representative of a member.  .0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.
Ctive date is listed, the date must be specifiling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	nber or an authorized representative of a member.  .0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State
REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony  Rayn A. King	nber or an authorized representative of a member0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, that it is a document to the Department of State as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony  Rayn A. King	nber or an authorized representative of a member.  .0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State
REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony  Rayn A. King	nber or an authorized representative of a member0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)  Typed or printed name of signce
REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony  Rayn A. King	nber or an authorized representative of a member0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true0303 (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
ctive date is listed, the date must be specifiling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony  Rayn A. King	nber or an authorized representative of a member0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)  Typed or printed name of signce

ARTICLE IV-