L15000057055

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		:		





700270251657

03/10/15--01012--010 **125.00

SECRETARY OF SHALL BEAUTION OF CORPORATION

11/13

Division of Corporations
SUBJECT: R. A.D. Urban Farms, L. L.C. Name of Limited Liability Company
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:
Michael Rovner (using businessalins of Vil Rovner) Name of Person
R.A.D. Urban Farms, L.L.C. Firm/Company
Address Lehigh Acres, Florida 33936 City/State and Zip Code Vil. Rövner@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Address
Lehigh Acres, Florida 33936
Vil. Röuner@amail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
V.1 höyner at (312) 834-4684 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:		
R.A.D. Urhan Farms, L.L.C. (Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.'	")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is	s:
Principal Office Address:	Mailing Address:	
Michael Rövner	Michael Royner	
29 Michigan Rd. Lehigh Azres, Fl. 33936	29 Michigan Rd. Cehigh Aures, Fl. 33936	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its of another business entity with an active Florida registra	wn Registered Agent. You must designate a	un individual or
The name and the Florida street address of the registe		olvije 15
Michael Röuner Na 29 Michiaan Rd. Florida street address (P.O. I	ime	SECRE OF CORPORATION OF 15 MAR 10 AM 10: 06
29 Michigan Rd.		o con
Florida street address (P.O. I		Coarga A. 10: 0
Lehigh Actes City	FL 33936 Zip	06
Michael Son	cept the appointment as registered agent and ons of all statutes relating to the proper and c	ed liability company at d agree to act in this complete performance

(CONTINUED)

Page 1 of 2

ARTICLE IV- The name and address of ea	ach person authorized to manage and control the Limited Liability Co	FILED SECRETARY OF STATE OMDRANY: DIVISION OF CORPORATION
<u>Title:</u>	Name and Address:	15 MAR 10 AM 10: 01
"AMBR" = Authorized Me "MGR" = Manager	ember	
AMBR	Michael Royner (pseudonym Vil) 29 Michigan Rd	Royner)
	Lehigh Actes, FL 33936	
AMBR	Joson Dawkins 212 NU 11 St.	
	Cape Coral, FL 33993	
AMBR	James Alderman	
	911 Graystone Ave. Lehigh Acres, FL 37974	
·····		
(Use attachment if necessar	ry)	
ARTICLE V: Effective date, if other	r than the date of filing: 3-March - 2015 (OPTION	VAL)
(If an effective date is listed, the dat the date of filing.)	te must be specific and cannot be more than five business days pri	
ARTICLE VI: Other provisions, if a	ny.	
		
REQUIRED SIGNATUR	E: O U	
_ Nicke	War of	
Sign (In accomplante w	thurs of a member or un authorized representative of a member. ith section 605.0203 (1) (b), Florida Statutes, the execution of this de	ocument
constitutes an aff I am aware that a	irmation under the penalties of perjury that the facts stated herein are my false information submitted in a document to the Department of St degree felony as provided for in s.817.155, F.S.)	e true.
	ichael Rövner 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)