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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 : MCLEOD, MCLEOD & MCLEOD, P.A.
Account Number : 076635001571
Phone : (407) 886-3300
Fax Number : (407) 886-0087

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

Email Address: mitch@msdicompany.com

FLORIDA LIMITED LIABILITY CO.
RMF SPECIALIZED, LLC

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JUN -3 2015
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June 2, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MCLEOD, MCLEOD & MCLEOD, P.A.

SUBJECT: RMF SPECIALIZED, LLC
REF: W15000038330

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Terri J Schroeder
Regulatory Specialist II

FAX Aud. #: H15000128851
Letter Number: 915A00011503

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
FOR
RMF SPECIALIZED, LLC
a Florida Limited Liability Company

The undersigned, desiring to form a limited liability company under and pursuant to the Revised Limited Liability Company Act, Chapter 605, *Florida Statutes*, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I

Name

The name of this Company shall be RMF SPECIALIZED, LLC ("the Company").

ARTICLE II

Duration

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III

Mailing Address

The mailing address for the Company is 215 Cadiz Court, Merritt Island, Florida 32953. The street address for the Company is 215 Cadiz Court, Merritt Island, Florida 32953.

ARTICLE IV

Registered Agent and Office

The name and street address of the initial Registered Agent and office for the Company is:

ROBERT M. FORTNER
215 Cadiz Court
Merritt Island, Florida 32953

ARTICLE V

Admission of Additional Members;
Terms and Conditions of such Admissions

Additional Members may be admitted upon unanimous consent of the Members of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of this Company.

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ARTICLE VI

Right to Continue Business

If, but for the exercise of the right to continue the Company's business, as specified below, the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member, or the occurrence of any other event which terminates the continued membership of a Member in the Company, shall cause the dissolution of the Company, then the business of the Company shall continue (without dissolution) if elected, in writing, within ninety (90) days of the occurrence of such event by any remaining Member.

ARTICLE VII

Management by Member(s)

The Company will be managed by its Member(s). The name and address of the initial Managing Member is:

ROBERT M. FORTNER
215 Cadiz Court
Merritt Island, Florida 32953

ARTICLE VIII

Regulations of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the Company shall be vested in the Members.

ARTICLE IX

Informal Action of Members

Any action of the Members may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting and filed with the Company as part of its records.

ARTICLE X

Transferability of Member's Interest

An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement.

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IN WITNESS WHEREOF, the undersigned has hereunto set his hand this 29th day of May, 2015.

Robert M. Fortner
ROBERT M. FORTNER

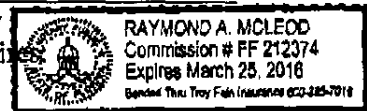
STATE OF FLORIDA
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this 29th day of May, 2015, by ROBERT M. FORTNER, who (☒ one) ☐ is personally known to me or produced as identification.

(SEAL)

Raymond A. McLeod
NOTARY PUBLIC

Print Name of Notary
My Commission Expires



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TALLAHASSEE, FLORIDA

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STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above-stated limited liability company, I, ROBERT M. FORTNER, 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 as provided in Chapter 605, *Florida Statutes*.



ROBERT M. FORTNER

STATE OF FLORIDA
COUNTY OF BREVARD

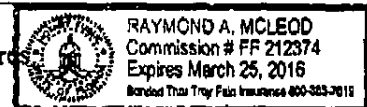
The foregoing instrument was acknowledged before me this 27th day of May, 2015, by ROBERT M. FORTNER, who (✓ one) ✓ is personally known to me or _____ produced _____ as _____ identification.

(SEAL)



NOTARY PUBLIC

Print Name of Notary
My Commission Expires



(RMFSpecializedLLC/05-28-15/RAM)

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COUNTY OF BREVARD
FLORIDA