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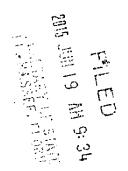
(Re	questor's Name)	
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PICK-UP	WAIT .	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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### **COVER LETTER**

	Division of Co			
SUBJECT	RYT LLO	2		
SOBOLE	· • <del></del>	Name of Li	mited Liability Company	
The enclos	sed Articles o	of Organization and fee(s) a	re submitted for filing.	
Please retu	ırn all corres <sub>i</sub>	pondence concerning this m	atter to the following:	
	Ronald S Y	oung/		
	***************************************		Name of Person	
			Firm/Company	
	1210 SW 5	2nd Ter	<del></del>	
			Address	
	Cape Coral	I, FL 33914-7065		
	ron33205@a		City/State and Zip Code	
		E-mail address: (to be used	I for future annual report notificat	ion)
For further i	information c	oncerning this matter, pleas	e call:	
	Ronald You	ing 2	39 222-1443	
	Na	me of Person A	Area Code Daytime Telephon	e Number
Enclosed i	s a check for	the following amount:		
\$125.00 F	iling 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
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# Street Address

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RYTLLC				<del></del>
(Must end	l with the words "Limited	d Liability Company	, "L.L.C.," or "LLC.")	
ARTICLE 11 - Address:				
The mailing address and street a	address of the principal o	office of the Limited	Liability Company is:	
<u>Princi</u>	pal Office Address:		Mailing Address:	
1210 SW 52nd Ter		1210	SW 52nd Ter	
Cape Coral, FL 339	914-7065	Capo	Coral, FL 33914-7065	·
				20
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an The name and the Florida street	y cannot serve as its own active Florida registration t address of the registered	n Registered Agent. ` on.)	nt's Signature: You must designate an individual	書館
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration	n Registered Agent. `on.) d agent are:		19 里口
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration t address of the registered	n Registered Agent. ` on.)		19 是 15
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration t address of the registered	n Registered Agent. `on.) d agent are:		靈 5 日
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration taddress of the registered ROLACO LLC	n Registered Agent. `on.) d agent are: Name	You must designate an individual	19 里口
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration taddress of the registered ROLACO LLC  1210 SW 52nd Ter	n Registered Agent. `on.) d agent are: Name	You must designate an individual	19 里口

Having been named as registered agent and to accept service of process for the above stated limited liability 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 as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	n 110 v
MGR	Ronald S Young
	1210 SW 52nd Ter Cape Coral, FL 33914-7065
	Cape Corai, FL 33914-7003
AMBR	Latisha G Davis
	1701 E 7th St
	Lehigh Acres, FL 33972
	<u> </u>
	<u> </u>
EV: Effective date, if other than the cetive date is listed, the date must be filing.)	date of filing: (OPTIONAL)  specific and cannot be more than five business days prior to or 90 days of meet the applicable statutory filing requirements, this date will not be
ective date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Departme EVI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 days or meet the applicable statutory filing requirements, this date will not be ent of State's records.
E V: Effective date, if other than the coctive date is listed, the date must be filling.) the date inserted in this block does numerically a continuous effective date on the Department's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 days or meet the applicable statutory filing requirements, this date will not be ent of State's records.
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