

L16000066320

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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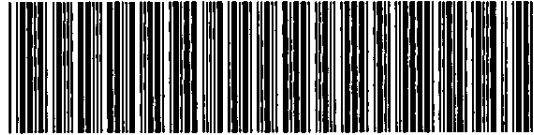
(Business Entity Name)

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16 APR - 1 PM 12:02  
TREASURY OF STATE  
TALLAHASSEE, FLORIDA

MD 4/6

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

Subject: Henry M. Rhodes, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

James A. Cramer  
James A. Cramer Accounting  
8012 Hancock St.  
Riverview, FL 33578

For further information concerning this matter, please call:

James A. Cramer (813) 671-9148

Enclosed is a check for the following amount:

\$125.00 Filing Fee

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

16 APR - 1 PM 12:02

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**ARTICLE I**

The name of the Limited Liability Company is:

**Henry M. Rhodes, LLC**

**ARTICLE II**

The mailing address and street address of the principal office of the Limited Liability company is:

**6323 Lansdale Circle  
Tampa, FL 33616**

**ARTICLE III**

The Registered Agent shall be:

**HENRY M. RHODES  
6323 Lansdale Circle  
Tampa, FL 33616**

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated on 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..*

  
Henry M. Rhodes

**ARTICLE IV**

The name and address of each person authorized to manage and control the Limited Liability Company is:

<b>AMBR</b>	<b>HENRY M. RHODES</b>
<b>MGR</b>	<b>6323 Lansdale Circle</b>
	<b>Tampa, Fl 33616</b>

**ARTICLE V**

The effective date is: **APRIL 1, 2016**

  
\_\_\_\_\_  
*Signature of authorized member*

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

**Henry M. Rhodes**

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16 APR - 1 PM 12:02  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA