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(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

	tegistration Section livision of Corporations		
SUBJECT	2550 RAM FAM, LLC		
SUBJECT		Limited Liabili	ty Company
The enclos	sed Articles of Organization and fee(s	s) are submitted	for filing.
Please retu	arn all correspondence concerning this	s matter to the fo	ollowing:
	Timothy G. Carroll		
	•	Name of	Person
	Harrison Held Carroll & Wall, LLF	•	
		Firm/Cor	npany
	333 West Wacker Drive, Suite 170	0	
		Addre	ss
	Chicago, IL 60606 - 1247		
	rick@rlmcgrath.com	City/State and	Zip Code
•	E-mail address: (to be u	sed for future ar	nnual report notification)
For further i	nformation concerning this matter, pl	ease call:	
	Timothy G. Carroll	312	214-9003
	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for the following amount:		
\$125.00 F	iling Fee \$\frac{1}{2}\$130.00 Filing Fee & Certificate of Status	LCertifie	Spriling Fee & Spriling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314) [(Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1

ARTICLE I - Name: The name of the Limited Liability Company is:	
2550 RAM FAM, LLC	
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the street address.	ne Limited Liability Company is:
Principal Office Address:	Mailing Address:
19304 La Serena Drive	19304 La Serena Drive
Ft. M.yers, FL 33967	Ft. M ⁻ yers, FL 33967
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are	2:
Richard L. McGrath	

Name

Florida street address (P.O. Box NOT acceptable)

am familiar with and accept the obligations of my position as registered agent as proyeded for in Chapter 605, F.S..

FL

19304 La Serena Drive

Ft M. yers

City State Zip

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

33967

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2



Citle:		Name and Address:
AMBR" = Author		
MGR" = Manager MGR		Richard L. McGrath
		19304 La Serena Drive
		Ft. M. yers, FL 33967
 		
		-
V: Effective date, tive date, filing.)	if other than the date of filin the date must be specific a	ng: (OPTIONAL) and cannot be more than five business days prior to or 90
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V: Effective date, etive date is listed, filing.) the date inserted in ent's effective date VI: Other provision EFOUIRED SIGN Thi	this block does not meet the on the Department of State ons, if any. Signature of a member of a ware that any false inform stitutes a third degree felony. Richard L. McGrath	e applicable statutory filing requirements, this date will not e's records. or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. anation submitted in a document to the Department of State

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