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	INC.		6th Avenue. Tallahass ~ (850) 222-2666	ee, Florida 32303 or (800) 969-1666. Fax (850) 222-1666
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ARIKI	LESOF ORGANIZATION FOR FL		
TICLE I - Name:			
e name of the Limited L	iability Company is:		
Rockit III, LLC	<u>g</u>		
(Mus	st end with the words "Limited L	ability Compan	y, "L.L.C.," or "LLC.")
TICLE II - Address: mailing address and st	reet address of the principal offi	ce of the Limited	d Liability Company is:
<u>P</u> 1	rincipal Office Address:		Mailing Address:
		P.C	Box 26408
6030 S. Lagoo	ii Drive	<u>.</u>	
Panama City B TICLE III - Registere e Limited Liability Cor	each, FL 32408 ed Agent, Registered Office, &	Bir Registered Age	mingham, AL 35260 ent's Signature: You must designate an individual or
Panama City B TICLE III - Registere the Limited Liability Corother business entity with	each, FL 32408 ed Agent, Registered Office, & npany cannot serve as its own R	Bir Registered Age egistered Agent.	nt's Signature:
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Ho ple further agree to comply with the provisions of all statutes relating to the proper and complete performance of my dual am fumiliar 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 Lof 2

Title		i	Name and Address:
	IBR" = Authorized !	Member	
	GR" = Manager IR		Pohert Lee Dike Ja
IMCI			Robert Lee Pike, Jr. 6030 S. Lagoon Drive
			Panama City Beach, FL 32408
			The second secon
(Use	attachment if neces	sary)	
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