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FLORIDA LIMITED LIABILITY CO. **RUS 424 LLC.**

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIC	LE I -	Name:
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The name of the Limited Liability Company is:

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
HOLESTEAD, FL 33025	1677 527 Et ment 109.
HOLLESTEAD, PL 33035	Homested Fc 33035
	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

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 felating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positive as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

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The name and address of each person authorized	d to manage and control the Limited Liability Company:		
Title: "AMBR" ≈ Authorized Member	Name and Address:		
Auth MEMBER.	RUS MANAGENENT INC 1677 SE ZAM EXMITING.	 	
AUTH MEMBER	LIVING IN AMELICA U.C.	<u>-</u>	
MGR.	LENNYS Y. HOLINA 1677 SE 27th of west 109 Nomestage, FL 33035	- - -	
		_ _ _	
(Use attachment if necessary)			
(If an effective date is listed, the date must be specific a the date of filing.) Note: If the date inserted in this block does not meet the the document's effective date on the Department of State ARTICLE VI: Other provisions, if any.	e applicable statutory filing requirements, this date will t		
REQUIRED SIGNATURE	A. M. I :		- -
This document is executed in a I am aware that any false inform	or an authorized representative of a member, accordance with section 605.0203 (1) (b), Florida Statute nation submitted in a document to the Department of Stay as provided for in s.817.155, F.S.	— :3. te	
<u>LENNYS</u>	HOLINA ed or printed name of signee		
1 ype	Filing Feez:		.
\$125.00 Filing Fee for Articles of Organiza \$ 30.00 Certified Copy (Optional)		25	3.00
\$ 5.00 Certificate of Status (Optional)		بوسه ه ۱۹ هر	

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