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Certified Copies	_ Certificates	s of Status
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16 JUN 23 PH 2: 45

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Richmark Property Name of Limited Liab	Management LLC.
The enclosed Articles of Organization and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to the	e following:
Rory P. Mudge	
Name of	of Person
Richmark Property	Management LLC.
rirm/C	company o
17626 Cypress Pt	Rd. SE
Fort Myers, Florida	33 9 6 7
Richmark PM@	and Zip Code embara maile Com ennual report notification)
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Rory Mudge at 239 Name of Person Area Code	362-6270
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee \$\$155 Certificate of Status (additional content of the con	fied Copy chal copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Richmark Property Management LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "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 Limited Liability Company is:
Principal Office Address: Mailing Address:
DIDICE DIDICE

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:

Roger	P. Muda	e
ز	Name	•
17626 C	y pess Pt. Rd dress (P.O. Box NOT	, SE
Florida street ad	dress (P.O. Box NOT	acceptable)
Fort Myer	5 , Florida	33967
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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent

(CONTINUED)

Signature (REQUIRED)

Page 1 of 2

16 JUN 23 PH 2: 46

## ROTH Mudge 17626 (Yptes 74. Rd. 56	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
(Use attachment if necessary) (OPTIONAL) (OPTIONAL) (OPTIONAL) (OPTIONAL) (OPTIONAL) (OPTIONAL) (In the date in listed, the date must be specific and cannot be more than five business days prior to or 90 day e of filing.) (It has the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lument's effective date on the Department of State's records. (ILE VI: Other provisions, if any. (ILE		n 4. l
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