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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	Rail Road Records, LLC		
SUBJEC	Name of Limited Liability Company		
The encl	osed Articles of Organization and fee(s) are submitted for filing.		
Please re	turn all correspondence concerning this matter to the following:		
	Sharon McGee Hale, EA		
	Name of Person	_	
	Hale, McGee & Associates, LLC		
	Firm/Company		
	883 W Granada Blvd.		Ξ.
	Address	5 AUS	
	Ormond Beach, FL 32174	22.5	स्तातिक स्टब्स्स
	City/State and Zip Code halemcgee@bellsouth.net	_ <u>=</u> :	795
	E-mail address: (to be used for future annual report notification)	三 二 2 := 2	7 <u>(7)</u> 20 (8)
For furthe	r information concerning this matter, please call:	0	EH.
	Sharon McGee Hale, EA 386 672-6742		
	Name of Person Area Code Daytime Telephone Number		
England	dia a shaek for the following amount:		
	Filing Fee \$\int \text{\$130.00 Filing Fee & Certificate of Status}\$\text{Certified Copy (additional copy is enclosed)}\$\$ \$155.00 Filing Fee & Certificate of Statu (additional copy is enclosed)	s &	
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:		
Rail Road Records, LI			
(Must end w	ith the words "Limited	Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	dress of the principal of	fice of the Lin	nited Liability Company is:
<u>Principa</u>	Office Address:		Mailing Address:
1404 Golfview Drive			1404 Golfview Drive
Daytona Beach, FL 3	2114		Daytona Beach, FL 32114
another business entity with an ac	cannot serve as its own trive Florida registration	Registered Ag	Agent's Signature: ent. You must designate an individual or
The name and the Florida street ac	duress of the registered	agent are.	
	Sharon McGee Hale,	EA	
		Name	
	883 W Granada Blvd		
	Florida street address	(P.O. Box N 0	or acceptable)
	Ormond Beach,	FL	32174
	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's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

"MGR" = Manager AMBR Richard Blanchard 1404 Golfview Drive Daytona Beach, FL 32114 (Use attachment if necessary) FICLE V: Effective date, if other than the date of filing: October 1, 2016 n effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days date of filing.) E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
(Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: October 1, 2016		1404 Golfview Drive
(Use attachment if necessary) ICLE V: Effective date, if other than the date of filing: October 1, 2016 (OPTIONAL) n effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days ate of filing.) Est 1f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be locument's effective date on the Department of State's records.		
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	effective date is listed, the date must be sate of filing.) If the date inserted in this block does not	specific and cannot be more than five business days prior to or 90 days at meet the applicable statutory filing requirements, this date will not be list
CLE VI: Other provisions, if any.	beament's effective date of the Departmen	

Signature of a member or an authorized representative of a 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.

Richard Blanchard

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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