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200305526482

11/14/17--01024--004 **125.00

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: R. RYSDON RENTALS		
SUBJECT: Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
RICHARD RYSDON		
Name of Person		
R. RYSDON RENTALS Firm/Company		
Firm/Company		
3415 SEAWAY DR		
Address		
NEW PORT RICHEY FL 34652		
City/State and Zip Code To APPLY FoR		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
RICHARD RYSDAN at 727 BO9 1348 Name of Person Area Code Daytime Telephone Number		
Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 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:
R. RYSDON RENTALS LLC
(Must contain 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:
3415 SEAWAY DR (SAME) NEW PORT RICHEY FL 34652
NEW PORT RICHEY FL 34652
another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: RIGIARD RYSDON Name
3415 SEAWAY DR Florida street address (P.O. Box NOT acceptable)
NEW PORT RICHEY FL 34652 City State Zip
City State Zip
daving been named as registered agent and to accept service of process for the above stated limited liability company at the dace designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I wither agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and im 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)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member "MGR" = Manager R	Name and Address:
	RICHARD RYSDON 3415 SEAWAY DR. NEW PORT RICHEY, FL 34652
	
(Use attachment if necessary) RTICLE V: Effective date if other than the date of fil	ing: (OPTIONAL)
if an effective date is listed, the date must be specific re date of filing.)	and cannot be more than five business days prior to or 90 days after he applicable statutory filing requirements, this date will not be listed a
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Lusdon
This document is executed in I am aware that any false info constitutes a third degree felo	r or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, rmation submitted in a document to the Department of State only as provided for in s.817.155, F.S.
<u>RicHARD</u>	Rysnow ped or printed name of signee

as

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)