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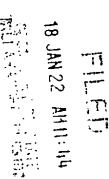
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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N CULLIGAM
JAN 2 3 2018

COVER LETTER

1,25

TO: New Filing Section Division of Corporations	
SUBJECT: RED TRAGON PARTIES I Name of Limited I	Liability Company
The enclosed Articles of Organization and fee(s) are subm	nitted for filing.
Please return all correspondence concerning this matter to	the following:
VICTOR A. Ry	12 nc of Person
RED DRAGE	ON PHOTOGRAPHY m/Company
KISSIMMEE , FL City/Sta VN Lycky 1 @ YAHOO . o E-mail address: (to be used for fu	3 4758
VNLUCKILE YAHOO.	COM
	ture annual report notification)
For further information concerning this matter, please call:	
Name of Person Area Co	7 749-6535 Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status	155,00 Filing Fee & S160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301



9010 JAN 22 FR 2:52

FLORIDA DEPARTMENT OF STATE Division of Corporations

Tipe topic

January 9, 2018

VICTOR A RUIZ 5554 WILLOW BEND TRAIL KISSIMMEE, FL 34758

SUBJECT: RED DRAGON PHOTOGRAPHY

Ref. Number: W18000002129

We have received your document for RED DRAGON PHOTOGRAPHY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 718A00000530

Neysa Culligan Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Name	The name of the Limited Liability Company is:		
Principal Office Address: Principal Office Address: Mailing Addr	(Must contain the words "Limited Liability Company, "L.L.C.," of "LL.C.")	_	
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 registered agent are: VICOLE RUIZ Name SSP TRAIL Florida street address (P.O. Box NOT acceptable) SSIMMER RUISIMMER RUISIMMER			
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 registered agent are: Vicole Ruiz Name South Willow Band Trail Florida street address (P.O. Box NOT acceptable) Sussimmes Ruissimmes Ruissimm	Principal Office Address: Mailing Address:		
The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or mother business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Vicole Ruiz Ruiz	#554 WILLOW BEND TRAIL 5554 WILLOW BEND KISSIMMEE, PL 34758 KISSIMMEE IPL 34758	TRAIL	_
Name Name SSSY WILLOW BOND TRAIL Florida street address (P.O. Box NOT acceptable) KISSIMMEE R. 34758	The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or	_	
Name SSSY WILLOW BOND TRAIL Florida street address (P.O. Box NOT acceptable) KISSIMMEE R. 34758		18 JAN	{
Florida street address (P.O. Box NOT acceptable) KISS (MMEE PL 34758	Name FEEL (11/10) Q 1. D TOA:/	्र _ा ः २	
· · · · · · · · · · · · · · · · · · ·	Florida street address (P.O. Box NOT acceptable)		
	Florida street address (P.O. Box NOT acceptable) LISS (MMEE FL 34758		

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..

Nich Lin

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing:		dann affar
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and can the date of filing.) Note: If the date inserted in this block does not meet the appli	//CTDR A. RUIZ (554 Willow BEND TRAIL USSIMMER, FL. 34758	day affor
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he date of filing.) Note: If the date inserted in this block does not meet the appli		
		be listed as
the document's effective date on the Department of State's rec	eords.	
ARTICLE VI: Other provisions, if any.		
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		<u></u>
REQUIRED SIGNATURE:		至可
	71	22
Mes		<i></i>
	authorized representative of a member.	MINING.
	ance with section 605.0203 (1) (b), Florida Statutes.	= 1
l am aware that any false information constitutes a third degree felony as pr	submitted in a document to the Department of State	<u>:</u>
	1" 1 + +++	1 2
Victor A. Rui Typed or p	Z	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)