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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: PD Christian Viname of Limited Liz	bility Company
The enclosed Articles of Organization and fee(s) are submit	ted for filing.
Please return all correspondence concerning this matter to t	he following: (hristian
Nam	e of Person
SOO Yello	NMOON D
	•
Tallahay	sel, HL 32312
City/Sta rock - Chris ~ E-mail address: (to be used for fu	S-EL FL 32312 ate and Zip Code 1 pha & gmail com ture annual report notification)
For further information concerning this matter, please call:	
	ode Daytime Telephone Number
Enclosed is a check for the following amount:	
Cartificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy dditional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle. Tallahassee, FI. 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
RDChristian LLC			
(Must contain the words "Limited Liability Company, "L.L.C.," or "Ll.C.")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address: Mailing Address:			
8000 Yellow Mood Dr. Tallchasser, 1-1. 52312			
Tallchasset, I-L. SZZIZ			
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.)		D =	
The name and the Florida street address of the registered agent are: Rodner D. Christian	lui.		
Rodung D. Christian Name Name Voca Yellow Moon Dr. Florida street address (P.O. Box NOT acceptable)	<u>工</u> 清:	4UG-6	- r
8000 yellow Moon Dr.		9-	TILED
Florida street address (P.O. Box NOT acceptable)	· 一年	PK	
Tollahassee Fl. 32312 City State Zip	20 20 20 20 20 20 20 20 20 20 20 20 20 2	РК 3: 0:	U
J.,	<u> </u>	C	
Having been named as registered agent and to accept service of process for the above stated limited liability company place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacifurther agree to comply with the provisions of all statutes relating to the proper and complete performance of my dution 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)			
(CONTINUED)			

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address: Rodney Christian Rodney Moon Tallahasada FL, 32317
MCR.	
n effective date is listed, the date must be spo	of filing: 8 ' 6 ' 1 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days af
late of filing.) e: If the date inserted in this block does not n	neet the applicable statutory filing requirements, this date will not be liste
late of filing.) e: If the date inserted in this block does not n document's effective date on the Department TCLE VI: Other provisions, if any.	·
e: If the date inserted in this block does not nedocument's effective date on the Department TCLE VI: Other provisions, if any. REQUIRED SIGNATURE:	of State's records.
e: If the date inserted in this block does not not document's effective date on the Department ICLE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a magnetic department is executed and any fals constitutes a third degree.	of State's records.

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)

ARTICLE IV-