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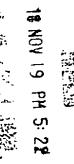
(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
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Special Instructions to	Filing Officer:			

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COVER LETTER

	ew Filing Section ivision of Corporations	,				
SUBJECT	RD Donaldson, LLC					
SOBOLET		Limited Liabilit	y Company			
The enclos	ed Articles of Organization and fee(s)	are submitted (or tiling.			
Please retu	rn all correspondence concerning this	matter to the fo	llowing:			
	Rollie Donaldson					
		Name of I	Person Person			
	RD Donaldson, LLC					
	Firm/Company					
	3995 SW Burner Terrace					
		Addre	ss			
	Palm City, FL 34990					
		City/State and	Zip Code			
-	E-mail address: (to be us	ed for future an	mual report notification	on)		
For further in	nformation concerning this matter, ple	ase call:				
	Rollie Donaldson	772	284-5844			
	Name of Person	Area Code	Daytime Telephone	Number		
Enclosed is	a check for the following amount:					
\$125.00 Fi	ling Fee \$\square\$130.00 Filing Fee & Certificate of Status	Certifie	Filing Fee & d Copy copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1 L C 2	itreet Address New Filing Section Division of Corporatio Clifton Building 661 Executive Center Callahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RD Donaldson, LLC (Must contain the words "Limited Liability C RTICLE II - Address: he mailing address and street address of the principal office of the					
(Must contain the words "Limited Liability C RTICLE II - Address:					
RTICLE II - Address:					
	e Limited Liability Company is:				
	e Emmed Buomity Company is.				
Principal Office Address:	Mailing Address:				
3995 SW Burner Terrace	3995 SW Burner Terrace				
Palm City, FL 34990	Palm City, FL 34990				
nother business entity with an active Florida registration.) the name and the Florida street address of the registered agent are	: :				
Rollie Donaldson					
Name					
3995 SW Burner Terrace	3995 SW Burner Terrace				
Florida street address (P.O. Bo	ox <u>NOT</u> acceptable)				
Palm City Flo	orida 34990				
City Star	te 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)

(CONTINUED)



ARTICLE IV	-
The name and	ac

ddress of each person authorized to manage and control the Limited Liability Company:

	Title:	Name and Address:	
	"AMBR" = Authorized Member		
	"MGR" = Manager MGR/AMBR	Rollie Donaldson	
	WOOTH TOTAL	3995 SW Burner Terrace	
		Palm City, FL 34990	
	MGR/AMBR	Priscilla McAdams	
		1375 SW 34th Street	
		Palm City, Fl. 34990	
			
		 	
			
	(Use attachment if necessary)		
lf an eft he date <u>Note:</u> l	LE V: Effective date, if other than the date of fifective date is listed, the date must be specific of filing.) If the date inserted in this block does not meet ument's effective date on the Department of Si	c and cannot be more than five business the applicable statutory filing requiremen	days prior to or 90 days after
RTICI	LE VI: Other provisions, if any.		
	REOUIRED SIGNATURE:		
		4.	
	Rolle o Nonald	an/	
	Signature of a member	er or an authorized representative of a r	member.
	inis document is executed in	n accordance with section 605.0203 (1) (b	o), Florida Statutes.
	constitutes a third degree feld	ormation submitted in a document to the Dony as provided for in s.817.155, F.S.	repartment of State
	constitutes a time degree fere	my as provided for in s.o. 17.155, 1.5.	
	Rollie Donaldson		achip. 😘
	Т,	mad or printed name of signed	

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)