

718000278015

William Garner Law

(Requestor's Name)

2010 DEER AVE.

(Address)

(Address)

TALLAHASSEE, FL 32303 (850) 509-5509

(City/State/Zip/Phone #)

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MAIL

ROBERT CARROLL REGIUM, LLC

(Business Entity Name)

(Document Number)

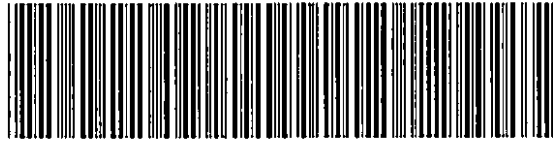
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SECRETARY OF STATE
TALLAHASSEE, FL 32304

**ARTICLES OF ORGANIZATION
OF
RedEye Capital Regional, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company (hereinafter referred to as the "Company") is:

"RedEye Capital Regional, LLC"

ARTICLE II — Addresses:

The mailing address of the Company is follows:

1196 Capital Circle NE, Suite D
Tallahassee, Florida 32301

The street address of the principal office of the Company is as follows:

2626 Capital Medical Blvd.
Tallahassee, Florida 32308

ARTICLE III — Management:

The Company is to be managed by a Manager and is, therefore, a Manager-managed company. The initial Manager of the Company shall be Mark McNees.

ARTICLE IV — Registered Agent:

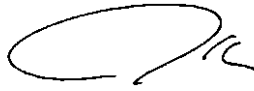
The name and the Florida street address of the initial registered agent are:

Jack E. Kiker, III, Esq.
Williams, Gautier, Gwynn, DeLoach & Kiker, P.A.
2010 Delta Blvd.
Tallahassee, Florida 32303

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TALLAHASSEE, FL 32309

Filing Fee: \$100.00 for Articles of Organization
 \$25.00 for Designation of Registered Agent

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, *Florida Statutes*.



Jack E. Kiker, III

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of the Company and its Manager, and acknowledge them to be my act this ____ day of November, 2018. In accordance with Section 605.0203(1)(b), *Florida Statutes*, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.115, *Florida Statutes*.



Mark McNees

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TALLAHASSEE, FLORIDA

Filing Fee: \$100.00 for Articles of Organization
\$25.00 for Designation of Registered Agent