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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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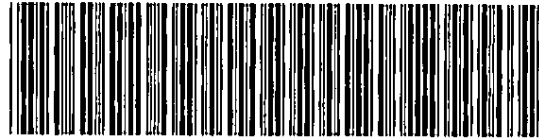
(Business Entity Name)

(Document Number)

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HARRISBURG, PENNSYLVANIA

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**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Redzone Orlando, LLC  
\_\_\_\_\_  
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:

Hayley Miller  
\_\_\_\_\_  
Name of Person  
  
Redzone Realty, LLC  
\_\_\_\_\_  
Firm/Company  
  
13705 Beach Blvd.  
\_\_\_\_\_  
Address  
  
Jacksonville, FL 32223  
\_\_\_\_\_  
City/State and Zip Code  
  
hmiller@redzonerealtygroup.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bryan C Goode III                      904                      247-1755  
\_\_\_\_\_  
Name of Person                      Area Code                      Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee      ☐ \$130.00 Filing Fee &  
Certificate of Status      ☒ \$155.00 Filing Fee &  
Certified Copy      ☐ \$160.00 Filing Fee,  
(additional copy is enclosed)      Certificate of Status &  
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, FL 32301

**ARTICLES OF ORGANIZATION  
OF  
RedZone Orlando, LLC**

**ARTICLE I - NAME**

The name of the limited liability company is **RedZone Orlando, LLC**, ("Company").

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

13705 Beach Blvd.  
Jacksonville, FL 32223

Mailing Address:

13705 Beach Blvd.  
Jacksonville, FL 32223

**ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Bryan C. Goode III, P.A.  
320 1<sup>st</sup> Street North, Suite 613  
Jacksonville Beach, Florida 32250

*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.*

Bryan C. Goode III, P.A.

By: 

Bryan C. Goode III, its President

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#### ARTICLE IV - MANAGERS OR AUTHORIZED MEMBERS

The Company will be Manager Managed and thus managed by one or more managers in accordance with and subject to the requirements of the Act and Operating Agreement of the Company. The name and street address of the manager of this Company is:

Name  
Lauren Martilli

Address  
13705 Beach Blvd.  
Jacksonville, FL 32223

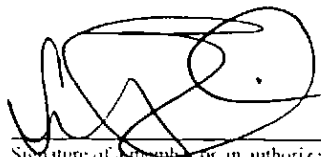
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#### ARTICLE V - OTHER MATTERS

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

The right, if given, to admit additional members and terms and conditions of the admissions, as well as the rights and obligations of the Members shall be set forth in the Operating Agreement of the Company as may be amended from time to time.

#### REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(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 s.817.155, F.S.)

Jason Babin, Authorized representative

Typed or printed name of signee