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COVER LETTER

	New Filing Section Division of Corporations	
SUBJEC	Red Door Holdings, LLC	
50000	Name of Limited Liability Company	
The enclo	nclosed Articles of Organization and fee(s) are submitted for filing.	
Please ret	e return all correspondence concerning this matter to the following:	
	Eric F Womack	
	Name of Person	
	Red Door Holdings, LLC	
	Firm/Company	
	4150 Belfort Road #550962	
	Address	
	Jacksonville, Florida 32255	
	City/State and Zip Code ewomackproperties@gmail.com	
	E-mail address: (to be used for future annual report notification	n)
For further	ther information concerning this matter, please call:	
	Eric F Womack 904 7185597	
	Name of Person Area Code Daytime Telephone	Number
Enclosed	sed is a check for the following amount:	
\$125.00	00 Filing Fee \$\int \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)}	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
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Red Door Holdin	gs, LLC ontain the words "Limited	Liability Company "I	LC "or"LLC")			
(ivitist C	omain the words. Limited	Liaomiy Company.	J.L.C., Of ELC.			
ARTICLE II - Address: The mailing address and stree	et address of the principal c	office of the Limited L	iability Company is:			
<u>Prin</u>	cipal Office Address:		Mailing Ad	dress:		
4150 Belfort Roa	id #550962	4150 E	Belfort Road #550961	2		
Jacksonville, Flor			onville, Florida 32255			
						
ARTICLE III - Registered (The Limited Liability Comp another business entity with The name and the Florida str	eany cannot serve as its own an active Florida registration cet address of the registered Eric F Womack 4150 Belfort Road #	n Registered Agent. Yoon.) d agent are: Name	ou must designate an	individual or · · · · · · · · · · · · · · · · · · ·	2119 OCT 16 AM 9: 52	
		121 1.4 -	22255	2		
	Jacksonville City	Florida State	32255 Zip			

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address;
"MGR" = Manager	
MGR	Eric F Womack
	4150 Belfort Road #550962
	Jacksonville, Florida 32255
AMBR	Tracilynn Mills - Womack
	4150 Belfort Road #550962
	Jacksonville, Florida 32255
	1500 0.00
	
(Use attachment if necessary)	
	date of filing: (/1/2020 (OPTIONAL)
TLE V: Effective date, if other than the of	date of filing:
e of filing.)	r specific and cannot be more than five business days prior to or 30 d
	not meet the applicable statutory filing requirements, this date will not b
cument's effective date on the Departm	· · · · · · · · · · · · · · · · · · ·
CLE VI; Other provisions, if any.	

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ZRE R Womaell
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)

REQUIRED SIGNATURE:

\$ 5.00 Certificate of Status (Optional)