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COVER LETTER

New Filing Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corporations	
SUBJECT: Rodeo's Rentals	
Name of Limite	d Liability Company
The enclosed Articles of Organization and fee(s) are su	abmitted for filing.
Please return all correspondence concerning this matter	to the following:
Dale E. Rod	eheaver, Jr. Name of Person
Rodeo's Rent	als LLC
	Firm/Company
14711 Coral	Berry Drive Address
-	Address
Tampa F	L 33626 State and Zip Code er @ g mail. com
City	State and Zip Code
F-mail address: (to be used for	future annual report notification)
	,
For further information concerning this matter, please ca	
Dale E Rodeheaver, Tr at (24	Code Daytime Telephone Number
Name of Person Area	Code Daytime Telephone Number
Enclosed is a check for the following amount:	PR III
□\$125.00 Filing Fee □\$130.00 Filing Fee &	□\$155.00 Filing Fee & □\$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status & dditional copy is enclosed) Certified Copy
	(additional copy is enclosed)
Mailing Address	Street Address
New Filing Section	New Filing Section Division
Division of Corporations	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Rodeo's Rentals L	-LC
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
14711 Coral Berry Drive	14711 Cosal Berry Drive
336.26	33626
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Registe another business entity with an active Florida registration.) The name and the Florida street address of the registered agent a	red Agent. You must designate an individual or re:
Dale E. Rud	elieaver, Jr
Name	
14711 Coral	Berry Drive 33 Sox NOT acceptable)
Florida street address (P.O. L	Box NOT acceptable)
Tampa F	レ 33626 気声を
City St	ate 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 (REQUIRID)

(CONTINUED)

ARTICLE IV-

 $\mathcal{H}_{\mathcal{A}} = \mathcal{A} \cup \mathcal{A} \cup \mathcal{A}$

The name and address of each person authorized to manage and control the Limited Liability Company:

		e and Address:
"AMBR" = Author		
"MGR" = Manager	· .	- Palahania to
<u>MER</u>	<u>Date 6</u>	- Rodeheaver tr
	Tanga	FL 33626
AMBR	Carol	Conclugue - Rodeneaver
<u>-() </u>	<u> 14711 (</u>	oral Berry Dr
	Tampa	PL_33676
AMBR	0-410	4 60 152
		Suthi) Raritan St
	Benve	1 Sqy(2 Swhy) Raritan St CO 80223
AMBR		
HMBR.	Scott	Rodeheaver
	990 L	- Ogan St Unit 802
		1 60 0020
	this block does not meet the applicate on the Department of State's record	able statutory filing requirements, this date will not be list
	•	4-"
TICLE VI: Other provisi	ons, if any,	
· - -		20
REOUIRED SIGN	NATURE:	
REQUIRED SIGN	() 0 0	
REOUIRED SIGN	Jale & Rodellaws	
	Signature of a member or an au is document is executed in accordan	inhorized representative of a member:
 Th I a	Signature of a member or an au is document is executed in accordan m aware that any false information su	of with section 605.0203 (1) (b). Florida Statutes ibmitted in a document to the Department of State
 Th I a	Signature of a member or an autis document is executed in accordant aware that any false information substitutes a third degree felony as proving the state of th	inhorized representative of a member: of with section 605.0203 (1) (b). Florida Statutes abmitted in a document to the Department of State yided for in s.817.155. F.S.
 Th I a	Signature of a member or an autis document is executed in accordant aware that any false information substitutes a third degree felony as proving the state of th	inhorized representative of a member: of with section 605.0203 (1) (b). Florida Statutes abmitted in a document to the Department of State yided for in s.817.155. F.S.
 Th I a	Signature of a member or an autis document is executed in accordant aware that any false information substitutes a third degree felony as proving the state of th	of with section 605.0203 (1) (b). Florida Statutes ibmitted in a document to the Department of State

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)