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PICK-UP WAIT MAIL					
(Business Entity Name)					
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(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Special instructions to Filing Officer.					

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WALK IN

		PICK U	P: 5/24 Glinda
		CERTIFIED COPY	
		PHOTOCOPY CUS	
	XX	FILING	LLC
1.		River Rock AX, LLC (CORPORATE NAME AND DOCUMEN	TT #)
2.		(CORPORATE NAME AND DOCUMEN	T #)
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COVER LETTER

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0110100		k AX, LLC				
SUBJECT	r:	Na	me of Li	mited Liabi	lity Company	· · · · · · · · · · · · · · · · · · ·
The enclos	sed Articles of	Organization and	fee(s) a	re submitte	for filing.	
Please retu	ım all corresp	ondence concernir	ng this m	atter to the	following:	
	Kevin A. Do	enti, Esquire				
				Name o	Person	
	Kevin A. De	enti, P.A.				
				Firm/Co	ompany	
	2180 Immol	calee Road - Suite	#316			
	Address					
	Naples, Flor	ida 34110				
			(City/State ar	d Zip Code	
	kdenti@denti		h			•
For further i		ncerning this matt			innual report notificat	ion)
Tor farmer 1		_	-			
	Kevin A. De		_	39 ————	260-8111 	
	Nam	e of Person	A	rea Code	Daytime Telephon	e Number
Enclosed is	s a check for th	he following amou	nt:			
≣\$125.00	Filing Fee	□\$130.00 Filin Certificate of S		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio	g Address iling Section on of Corporations ox 6327			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre	issec

Tallahassee, FL 32303

Tallahassee, Fl. 32314

2021 HAY 24 PH 1: 00

ARTICLES OF ORGANIZATION FOR FLOR	RIDA LIMITED LIABILITY COMPANY	C.T., , , ,
ARTICLE 1 - Name: The name of the Limited Liability Company is:	1.	Mi <u></u> ;;
River Rock AX, LLC		
(Must conatin the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office <u>Principal Office Address</u> :	of the Limited Liability Company is: Mailing Address:	
Attn: Matthew D. Whitmer	Attn: Matthew D. Whitmer	
500 S. Franklin Street	500 S. Franklin Street	-
Denver, Colorado 80209	Denver, Colorado 80209	
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registanother business entity with an active Florida registration.) The name and the Florida street address of the registered agen	stered Agent. You must designate an individu	al or
and the firstion of ect menters of air teststered asett	* *** **	

Kevin A. Denti, Esquire

Name 2180 Immokalee Road - Suite #316

Florida street address (P.O. Box NOT acceptable)

Florida Naples City State

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

Title:	Name and Address:	
	ed Member	
~	William Daniel Dampier	
NOK	Attn: Matthew D. Whitmer	
	500 S. Franklin Street, Denver, Colorado 80209	
	, r.	7
MGR	Matthew D. Whitmer	
	500 S. Franklin Street	1
"AMBR" = Authorized Member "MGR" = Manager MGR MGR MGR MGR MTICLE V: Effective date, if other than the of an effective date is listed, the date must be e date of filing.) ote: If the date inserted in this block does not document's effective date on the Department of an effective date on the Department of a This document is exert am aware that any file constitutes a third department of a	Denver, Colorado 80209	
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ARTICLE V: Effective date, if (If an effective date is listed, th the date of filing.) Note: If the date inserted in the	other than the date of filing: (OPTIONAL) the date must be specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be specific and c	
ARTICLE VI: Other provisions	s, if any.	
This d	Signature of a member or an authorized representative of a member. document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, aware that any false information submitted in a document to the Department of State tutes a third degree felony as provided for in s.817.155, F.S.	
	Keyin A. Denti, Esquire	
	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)