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November 22, 2022

Dear Summer C.

We spoke on the telephone today – you assisted us with our rejected filing of RC Drag Masters, Inc. and helped us to complete the new application for RC Drag Masters, LLC.

We emailed you a copy of the LLC application, but you can find a paper copy attached to this letter as well.

I have enclosed a check in the amount of \$37.50 for the LLC registration. We have a credit with you for the remaining \$87.50.

Please do not hesitate to reach out if I can help. I appreciate your assistance,

Sincerely,

Todd Marshall

COVER LETTER

TO: New Filing Sec Division of Cor			
SUBJECT:	C Drag	Masters, Lited Liability Company	LC
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspond	ndence concerning this mat	ter to the following:	
	Todd 1	Marshall Name of Person	
		Firm/Company	
,	78 Bi	g Oak Lane	SECIRE SECIRE OF INTERIOR
	Wild	wood FL -	22 NOV 30 PHIL:
E	tmars	Thall @ theat! For future annual report notificati	
For further information co	ncerning this matter, please	call:	
Todd M Nam		714 317- ea Code Daytime Telephone	D764 2 Number
Enclosed is a check for the	ne following amount:		
XIS125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	g Address	Street Address New Filing Section Di	vision

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

\checkmark	A N		
K	C Drag Mast	ers, LLC	
(Mus	t contain the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and st	reet address of the principal office of the	Limited Liability Company is:	
<u>Pr</u>	incipal Office Address:	Mailing Address:	
<u> 5833</u>	Pit Rd	78 Big Oak Lane	
<u> </u>	ell FL 33513	34785	
(The Limited Liability Cor	ed Agent, Registered Office, & Register	red Agent's Signature: Agent. You must designate an individual or	
(The Limited Liability Cor another business entity wi	ed Agent, Registered Office, & Register	Agent. You must designate an individual or	ΛΙΩ
(The Limited Liability Cor another business entity wi	ed Agent, Registered Office, & Register in the Registered of the an active Florida registration.) Street address of the registered agent are:	Agent. You must designate an individual or	O NOISIAIG
(The Limited Liability Cor another business entity wi	and Agent, Registered Office, & Register in pany cannot serve as its own Registered than active Florida registration.) street address of the registered agent are:	Agent. You must designate an individual or 22 NOV 30	DIVISION OF COL
(The Limited Liability Cor another business entity wi	rd Agent, Registered Office, & Register in pany cannot serve as its own Registered than active Florida registration.) street address of the registered agent are: Todd M Name 78 Big Florida street address (P.O. Box	Agent. You must designate an individual or 22 NOV 30	DIVISION OF PROFIS
(The Limited Liability Cor another business entity wi	rd Agent, Registered Office, & Register on Pany cannot serve as its own Registered than active Florida registration.) street address of the registered agent are: Todd M Name 78 Bia	Agent. You must designate an individual or 22 NOV 30 PM ST (NOT acceptable)	DIVISION OF CORE 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 at 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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Todd Marshall 78 Big bak lane wild wood FL 34785
	22 V
	NOT SECK
	30 G
(Use attachment if necessary)	P SOF
If an effective date is listed, the date must be the date of filing.)	ate of filing: Tan vary 2023. (OPTIONAL) specific and cannot be more than five business days prior to st meet the applicable statutory filing requirements, this date will not be listed int of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	HCC.
Signature of a	member or an authorized representative of a member.
	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
constitutes a third deg	ree felony as provided for in s.817.155, F.S.
	dd C. Mashall
	Typed or printed name of signee

as

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)