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	lew Filing Sec Division of Co				
SUBJECT		gs of Alabama, LLC			
30031501	·	Name c	of Limited Liab	ility Company	
The enclos	sed Articles of	Organization and fee	(s) are submitte	d for tiling.	
Please retu	ırn all correspo	ondence concerning th	is matter to the	following:	
	Daniel Mana	nusa			
			Name o	of Person	
	Manausa, Sh	iaw & Minacci			
			Firm/C	ompany	
	1701 Hermit	age Blvd, SUite 100			
		-	Ade	lress	
	Tallahassee,	FL 32308			
	danny@mana	neatur com	City/State a	ind Zip Code	
			used for future	annual report notificat	ion)
For further i	information co	ncerning this matter, [olease call:		
	Katie Rac		850 at (597-7616)	
	Nan	e of Person		Daytime Telephor	
Englosed i	k a cheek for t	he following amount:			
	D Filing Fee	□\$130.00 Filing F Certificate of State	is Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi P.O. F	ag Address illing Section on of Corporations lox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee eet, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
RC Holdings of Alabama, LLC					
(Must contain the words "Limited Liabilit	y Company, "L.L.C" or "L.L.C")				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:					
Dada single Office Addresses	Mailing Address:				
<u>Principal Office Address:</u>					
1843 Commerce Blvd	1843 Commerce Blvd				
					

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

 Daniel E. Manausa

 Name

 1701 Hermitage Blvd, SUite 100

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

 Tallahassee
 FL
 32308

 City
 State
 Zip

2024 FEB - 2 PM 1

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. In 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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
<u>MGR</u>	Ruben R. Rowe, III 1843 Commerce Blvd Midway, Fl 32343
	
(Use attachment if necessary)	
(If an effective date is listed, the date must be the date of filing.)	ate of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is exe I am aware that any fa	member or an authorized representative of a member, secuted in accordance with section 605.0203 (1) (b), Florida Statutes, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
Daniel Manau	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)