# L24000234625

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

Office Use Only



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## CORPORATE ACCESS, \_

### When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

X	CERTIFIED COPY		
	РНОТОСОРУ		
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Α	LPHA SIDE RV SERIVIC	ES LLC	
	CORPORATE NAME AND DOCUMES		
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#### **COVER LETTER**

TO:	New Filing Sec Division of Co						
SUBJEC		RV Services LLC					
00000		Name	of Limited L	iability Company		_	
The enclo	osed Articles of	Organization and fee	(s) are subm	itted for filing			
		ondence concerning th		_			
i icasc ic	tum an concept	ondence concerning th	ns mader to	the following.			
	Brian E. Lan	igford, Esquire					
		-	Nan	ne of Person			
	Langford &	Myers, P.A.					
		· <u>-</u> .	Firn	n/Company	<u> </u>	<del></del>	
	1715 West C	leveland Street					
			ř	Address		_	
	Tampa, FL 3	3606					
	brian@langfor	rdmyers.com	City/Stat	e and Zip Code		<del></del>	
	E	E-mail address: (to be	used for futi	ure annual report notifica	tion)		
For further	information cor	ncerning this matter, p	olease call:			2024 MAY 30	ne Çe
	Brian E. Lang	gford, Esquire	813	251-5533	<u> </u>	AY 30	مسدرا محمد ا
	Name	e of Person	Area Cod	le Daytime Telepho	ne Number	SOFT AH	
Enclosed	is a check for th	ne following amount:				1 9: 4 ESTAI	
	0 Filing Fee	□\$130.00 Filing For Certificate of Statu	s Ce	\$155.00 Filing Fee & rtified Copy (tional copy is enclosed)	Certificate Certified C	Filing Fee, of Status &	
		g Address ling Section		Street Address New Filing Section E	Division		

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

ARTICLE 1 - Name:					
The name of the Limited Lial	bility Company is:				
Alpha Side RV Se					
(Musi c	ontain the words "Limite	d Liability Compar	oy. "L.L.C" or "LLC.")		
ARTICLE II - Address:					
The mailing address and stree	t address of the principa	office of the Limit	ted Liability Company is:		
	cipal Office Address:				
			Mailing Addr	<u>ess</u> :	
7341 S. Leewynn			141 S. Leewynn Dr.		
Sarasota, FL 3424	0	<u>S</u> a	irasota, FL 34240	<del></del>	
			<del></del>		
ARTICLE 111 - Registered A	Agent, Registered Office	e. & Registered Aş	gent's Signature:		
<ul> <li>(The Limited Liability Compa</li> </ul>	my cannot serve as its ow	vn Registered Agen	t. You must designate an inc	lividual or	
another business entity with a	n active riorida registrat	ion.)			
The name and the Florida stre	et address of the register	ed agent are:			
		2			
	Brian E. Langford	Name			
	1715 West Clevelar				
	Florida street addre	ess (P.O. Box <u>NOT</u>	(acceptable)		
	Tampa	FL	33606		
	City	State	Zip		
Having been named as vaciety	dagant and as seemed				
Having been named as registered place designated in this certificate	te agent and to accept sent te. I hereby accept the am	vice of process for it pointment as registe	he above stated funited liabil. Wed goent and governous is	ity company at the	5
Juriner agree to comply with the	provisions of all statutes i	relating to the prop	er and complete performance	of my differ and	= ~
am familiar with and accept the i	obligations of my position	as registereefugen	t as provided for in Chapter	505, F.S	> >
				ن این	
		///			
		- ///			)

(CONTINUED)

Title: - "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Michael Bussell
	7341 S. Lecwynn Dr.
	Sarasota, FL 34240
<del></del>	
,	
(Use attachment if necessary)	
CLEV: Effective date, if other than the date	of filing: (OPTIONAL)
effective date is listed, the date must be sp	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
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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)

ARTICLE IV-