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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

· COVER LETTER

TO: Registration Division of C		
SUBJECT: RB A	Acres Sporthors	es LLC
SOBJECT:		red Liability Company
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corres	pondence concerning this mat	ter to the following:
<u>Marci S</u>	. Bloch	
		Name of Person
RB Acre	es Sporthorses I	_LC
	•	Firm/Company
4651 W	ingate Road	
		Address
Myakka (City, FL 34251	
		y/State and Zip Code
marci@as	sociationprograms E-mail address: (to be used	.COM for future annual report notification)
For further information	concerning this matter, please	
Marci S. Bloch	of Person	at (941) 322-2840 Area Code & Daytime Telephone Number
	for the following amount: \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

se;

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	$\mathbf{p}\mathbf{T}$	C	F	I _	Na	me:
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The name of the Limited Liability Company is:

RB Acres Sporthorses LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
4651 Wingate Road	4651 Wingate Road
Myakka City, FL 34251	Myakka Čity, FL 34251

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Ralph J. Bloch	
	Name
7132 Dornou	ugh Lane
Florida st	reet address (P.O. Box <u>NOT</u> acceptable)
Bradenton	_{FL} 34202
(City, State, and 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 608, F.S.

Registered Agent Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE

AND ASSES ELEMENT

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	r
MGRM	Marci S. Bloch 4651 Wingate Road Myakka City, FL 34251
(Use attachment if necessary)	
	nan the date of filing: March 14, 2011 (OPTIONAL) nust be specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	
Signature of a	member or the authorized representative of a member.
(In accordance with sect constitutes an affirmatio	ion 608.408(3), Fiorida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Filing Fees:

constitutes a third degree felony as provided for in s.817.155, F.S.)

Marci S. Bloch