## L13000020417

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

C. LEWIS
FEB - 8 2013
EXAMINER

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Bangz-Rhetta B, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Loretta B Kelly
Name of Person
Bangz-Rhetta B, LLC
Firm/Company
621 Saint Lucy Cresant
Address
Stuart, FL 34994
City/State and Zip Code
rhettabthatsme@gmail.com
Hamail address: (to be used for fitting annual report notification)

For further information concerning this matter, please call:

Loretta B Kelly	772 at (	215-5454
Name of Person	Area Code	& Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee U\$130.00 Filing Fee & Certificate of Status

Certificate of Status

Certified Copy
(additional copy is enclosed)

S160.00 Filing Fee,
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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is  Bangz-Rhetta B, LLC  (Must end with the words "Limited Liab		
(Must end with the words "Limited Liab		
	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	orincipal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
Trincipal Office Address.	Maning Audites.	
621 Saint Lucy Cresant	621 Saint Lucy Cresant	
Stuart, FL 34994	Stuart, FL 34994	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registationsess entity with an active Florida registration.)  The name and the Florida street address of the  Loretta B Kelly	stered Agent. You must designate an individual	
Name	8	₩ P
621 Saint Lucy Cresant Florida street ad	idress (P.O. Box NOT acceptable)	AH 8: 46
Stuart	FL 34994	<b>G</b> '^
City, S	tate, 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..

(CONTINUED)

Page 1 of 2

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(OPTIONAL)
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cument n are true. of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)