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(Re	equestor's Name)	ï
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		W16-1032

Office Use Only



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SECRETARY OF STATE

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S. PRATHER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2016

RAEANN HEATH KEYSER 1505 PLEASANT HARBOUR WAY TAMPA, FL 33602

SUBJECT: FL SUNNYLIFE COMPANY LLC

Ref. Number: W16000017775

We have received your document for FL SUNNYLIFE COMPANY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Stacy Prather Regulatory Specialist III

Letter Number: 416A00004920

RECEIVED

RECEIVED



February 15, 2016

RAEANN HEATH KEYSER 1505 PLEASANT HARBOUR WAY TAMPA, FL 33602

SUBJECT: RHK COMPANY LLC Ref. Number: W16000011032

We have received your document for RHK COMPANY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Stacy Prather Regulatory Specialist III

Letter Number: 716A00003089

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: RHK Company LLE  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:
Raeann Heath Keyser
Name of Person
Firm/Company
1505 Pleasant Harbour Wa
Address
Tanpa, LL 33602
City/State and Zip Code KEYSER 445@ Yahoo, COU
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$130.00 Filing Fee & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

# Mailing Address

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

### **Street Address**

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
FLSunny Life L. L. C.
(Must end with the words "Limited Liability Company, "LL.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:  Mailing Address:
1505 Pleusant HORDWIKWay Sonie
Tama, FL 33402
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:
- Raeunn H Keysen
Name
1505 DIEGSGME CINDONN /PS
Florida street address (P.O. Box NOT acceptable)
TUMA (1 331002 Way
City State 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 605. F.S.,
Lanual L
Registered Agent's Signature (REDUIRED)
(CONTINUED)
(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
11	
Manager	Raeuni H. Keysir 1505 Pleasant Harbour Tampa, Fl 33602
<del></del>	
- 4	
EV: Effective date, if other than the da	te of filing:
EV: Effective date, if other than the datective date is listed, the date must be sfiling.) the date inserted in this block does not	pecific and cannot be more than five business days prior to or 90 da meet the applicable statutory filing requirements, this date will not be
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E V: Effective date, if other than the da ctive date is listed, the date must be s f filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a not the Department is exectly a more aware that any fall.	meet the applicable statutory filing requirements, this date will not be not of State's records.  CCCCCCA  member or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b), Florida Statutes.  se information submitted in a document to the Department of State

Page 2 of 2