



THE UNITED STATES CORPORATION COMPANY

L000000/3006

ACCOUNT NO. : 072100000032

REFERENCE : 872665 7228676

AUTHORIZATION : Patricia Pigute

COST LIMIT : \$ 125.00

ORDER DATE : October 23, 2000

ORDER TIME : 11:13 AM

ORDER NO. : 872665-005

CUSTOMER NO: 7228676

CUSTOMER: Mr. Ralph Deponte  
Mr. Ralph Deponte

3126 Nw 67th Court

Fort Lauderdale, FL 33309

APPROVED AND FILED  
00 NOV -6 PM 2:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: R & M WHOLESALERS LLC

EFFECTIVE DATE:

100003453321--5

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

Handwritten initials: DW

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
00 NOV -6 PM 12:52  
NOTIFIED TO AGENCY OF FILING SUFFICIENCY OF FILING

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

R & M WHOLESALERS LLC

**ARTICLE II - Address:**

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

3126 Northwest 67th Court, Fort Lauderdale, Florida 33309

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

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

Corporation Service Company		
Name		
1201 Hays Street		
Florida street address (P.O. Box <u>NOT</u> acceptable)		
Tallahassee	FL	32301
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..*

*Laura R. Dunlap*  
Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

*Laura R. Dunlap*  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Laura R. Dunlap  
Typed or printed name of signee

- FILING FEES:**
- \$ 100.00 Filing Fee for Articles of Organization
  - \$ 25.00 Designation of Registered Agent
  - \$ 30.00 Certified Copy (OPTIONAL)
  - \$ 5.00 Certificate of Status (OPTIONAL)

DO NOV - 6 PM 2:  
 SECRETARY OF STA  
 TALLAHASSEE, FLOR.  
 APPROVE  
 AND  
 FILED

MEMBERS OF R & M WHOLESALERS LLC

Ralph DePonte                    3126 Northwest 67th Court  
Member                            Fort Lauderdale, Florida 33309

Mark DePonte                    375 Norwich-Salem Turnpike  
Member                            Oakdale, Connecticut 06370

dew

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TALLAHASSEE, FLORIDA

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of R & M WHOLESALERS LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this day of November 3 - 2000

\_\_\_\_\_  
Signature

DEPONTE, RAIPH  
Print Name of Signer

WITNESS:

Candace R. Carman  
Signature

Candace R. Carman  
Print Name of Witness

WITNESS:

Anderson Antonette  
Signature

ANDERSON ANTONETTE  
Print Name of Witness

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AND  
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