

# LO2000000/231

Florida Department of State  
Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 JAN 16

## Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

## LIMITED LIABILITY COMPANY

### RSVP, LLC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 JAN 16 AM 7:28

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| Certificate of Status | 0        |
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| Estimated Charge      | \$155.00 |

**H 02000014808**  
**ARTICLES OF ORGANIZATION FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name**

The name of the Limited Liability Company is:

**RSVP, LLC**

**ARTICLE II - Address**

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

**4620 1<sup>st</sup> Street**  
**Sarasota, FL 34235**

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

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

**David M. Turner**  
 Name

**19 West Flagler Street, Suite 600**  
 Florida street address

**Miami, FL 33130**  
 City, State, and Zip

**Miami, FL 33130**  
 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's Signature

**ARTICLE IV - Management (Check only if applicable).**

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

**Steven David**  
**2737 East Oakland Park Blvd.**  
**Ft. Lauderdale, FL 33306**

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

  
 Signature of a member or an authorized representative of a member.

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

**David M. Turner**

Typed or printed name of signer

**LI**

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