

U03 0000 34028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

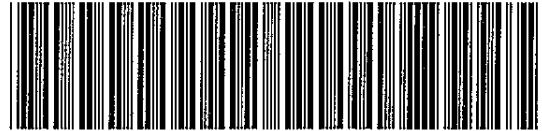
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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09/08/03--01059--020 \*\*155.00

U03-34028  
OK

**RENTAL PROPERTY SUPPLIES, L.L.C.**  
**Nathan K. Moses**  
**PO Box 611544**  
**Rosemary Beach, FL 32461**

TO: Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

**SUBJECT:** Rental Property Supplies, L.L.C.

Dear Sir/Madam:

The enclosed Articles of Organization and a check in the amount of \$155.00 for fees (Filing fee for Articles of Organization, Designation of Registered Agent, and certified copy) are submitted for filing. I am enclosing an extra original of the Articles of Organization to be certified and sent back to me at the address listed below.

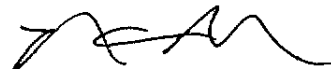
Please return all correspondence concerning this matter to the following: ..

Nathan K. Moses  
Rental Property Supplies, L.L.C.  
PO Box 611544  
Rosemary Beach, FL 32461

For further information concerning this matter, please call:

Nathan K. Moses at 850-278-2023

Very truly yours,



NATHAN K. MOSES

Enclosures

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

**ARTICLE I - Name**

Rental Property Supplies, L.L.C.

**ARTICLE II - Address:**

**Principal Office Address:**

62 Belmar Drive  
Santa Rosa Beach, FL 32459

**Mailing Address:**

PO Box 611544  
Rosemary Beach, FL 32461

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

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

Nathan K. Moses  
62 Belmar Drive  
Santa Rosa Beach, FL 32459

*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.*

  
Nathan K. Moses

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

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

**Title:**

**Name and Address:**

MGRM

Nathan K. Moses  
62 Belmar Drive  
Santa Rosa Beach, FL 32459

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
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.)

Nathan K. Moses

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)