

L03000037773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

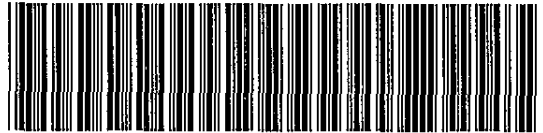
(Document Number)

Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



900022411819

10/03/03--01003--012 \*\*247.51

W10/3

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT -3 AM 9:21

RECEIVED  
DEF. STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
03 OCT -3 AM 9:14

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: R. & R. Abarbanel, L.L.C.  
(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:

Rita Abarbanel  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

3524 Trillium Court  
(Address)

Tallahassee, FL 32312  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rita Abarbanel at 850 668-0249  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT -3 AM 9:21

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

R & R Abarbanel, L.L.C.

## ARTICLE II - Address:

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

### Principal Office Address:

3524 Trillium Court  
Tallahassee, FL 32312

### Mailing Address:

3524 Trillium Court  
Tallahassee, FL 32312

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

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

Rita Abarbanel  
Name

3524 Trillium Court  
Florida street address (P.O. Box NOT acceptable)  
Tallahassee FL 32312  
City, State, and Zip

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT - 3 AM 9:21

*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.*

Rita Abarbanel  
Registered Agent's Signature

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Rita Abarbanel  
3524 Trillium Court  
Tallahassee, FL 32312

MGRM

Roy Abarbanel  
3524 Trillium Court  
Tallahassee, FL 32312

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Rita Abarbanel  
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.)

Rita Abarbanel  
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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT -3 AM 9:21