

L04000003068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

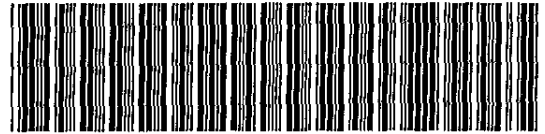
(Document Number)

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01/12/04--01005--018 \*\*25.00

11/17/03--01069--005 \*\*100.00

L04-3068

~~W03-34710~~

Need  
\$25.00

FILED  
STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
04 JAN -8 AM 8:50

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ricar, LLC  
(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:

David P. Masotti  
(Name of Person)

Masotti & Masotti  
(Firm/Company)

1100 Summer Street  
(Address)

Stamford, CT 06905  
(City/State and Zip Code)

For further information concerning this matter, please call:

David P. Masotti at ( 203 ) 323-1191  
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

November 19, 2003

DAVID P. MASOTTI  
MASOTTI & MASOTTI  
1100 SUMMER STREET  
STAMFORD, CT 06905

SUBJECT: RICAR, LLC  
Ref. Number: W03000034710

We have received your document for RICAR, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

FILING FEE \$100.00, REGISTERED AGENT FILING FEE \$25.00, TOTAL FEE \$125.00

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) 245-6918.

Nanette Causseaux  
Document Specialist Supervisor

Letter Number: 703A00062871

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Ricar, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2301 N. Congress Avenue #25

Boynton Beach, FL 33426-8605

**Mailing Address:**

2301 N. Congress Avenue #25

Boynton Beach, FL 33426-8605

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

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

John Mallozzi

Name

2301 N. Congress Avenue #25

Florida street address (P.O. Box NOT acceptable)

Boynton Beach,

FLORIDA 33426

City, State, and Zip

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DIVISION OF CORPORATIONS  
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*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, Florida Statutes..*

  
\_\_\_\_\_  
Registered Agent's Signature

**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:**

MGRM

Carol Ferraris

2301 N. Congress Avenue #25

Boynton Beach, FL 33426-8605

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

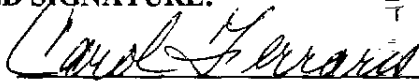
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(Use attachment if necessary)

**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.)

CAROL FERRARIS

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)

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