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## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: R&R Properties, 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:
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in the second se
Robin E. Stafford
SUBJECT: R&R Properties, 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:  Robin E. Stafford  (Name of Person)
75
R&R Properties, L.L.C.
(Firm/Company)
309 SW Atlantis Place
(Address)
(* Marie Vol)
Ft. White, FL 32038
(City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Robin E. Stafford at ( 386 ) 497-3762
(Name of Person) (Area Code & Daytime Telephone Number)

TO:

Registration Section

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY  ARTICLE I - Name: The name of the Limited Liability Company is:  R&R Properties, L.L.C.  ARTICLE II - Address:				
ARTICLE I - Name: The name of the Limited Liability Company is:	To the second se			
R&R Properties, L.L.C.				
ARTICLE II - Address: The mailing address and street address of the pri  Principal Office Address:	incipal office of the Limited Liability Company is:  Mailing Address:			
	309 SW Atlantis Place			
309 SW Atlantis Place	309 SW Alianis Flace			
Ft. White, FL 32038	Ft. White, FL 32038			
ARTICLE III - Registered Agent, Registered				
The name and the Florida street address of the re	gistered agent are:			
Robin E. Stafford				
Name				
309 SW Atlantis Place				
Florida street address (P.O.	. Box NOT acceptable)			
Ft. White	FLORIDA 32038			
City State an	<del></del>			

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

Page 1 of 2 (CONTINUED)

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

RTICLE IV- Manager(s) or Man e name and address of each Mana	ger or Managing Member is as follows:	THE PORT
i <u>tle:</u> MGR" = Manager MGRM" = Managing Member	Name and Address:	THE WASE TO BOOK
GR	Robin E. Stafford	γ 0
	309 SW Atlantis Place	<del></del>
	Ft White, FL 32038	<del></del>
GRM	Robert A. Stafford	
	309 SW Atlantis Place	<del></del>
	Ft. White, FL 32038	<del></del>
		<del></del>
		<del></del>

**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.)

Robin E. Stafford

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)