

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 04 MAR 26 AM 8: 08

LIMITED LIABILITY COMPANY

RC INVESTMENTS, 1040

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Corporate Filing

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ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	RC (NVES	MENTS, LLC		
ARTICLE II - A				
The mailing addr	ess and street address of t	he principal of	ice of the Limited L	isbility Company
Principal Office	Address:		failing Address:	
754 NE 167th Street	et	3	54 NE 167th Street	
North Miami Beach	n, Fl. 33162	Ď	orth Miami Beach, Fi.	33162
		•		
ARTICLE III - 1	Registered Agent, Regist	ered Office, &	Registered Agent'	's Signature:
	Registered Agent, Regist Florida street address of			's Signature:
				's Signature:
	e Florida street address of Craig D.	the registered a Savage		's Signature:
	e Florida street address of Craig D.	the registered :		's Signature:
	Florida street address of Craig D.	the registered a Savage	gent are:	's Signature:
	Florida street address of Craig D.	the registered : Savage Jame th Street, Suite :	gent are:	's Signature:
The name and the	Craig D. Craig D. 801 NE 167 Florida street address	the registered : Savage lame th Street, Suits : s (P.O. Box <u>NO</u> F	gent are:	
The name and the	Craig D. Craig D. 801 NE 167 Florida street address	the registered : Savage lame th Street, Suits : s (P.O. Box <u>NO</u> F	gent are:	
The name and the been named as reg	Craig D. Craig D. 801 NE 167 Florida street address North Miami Bas City, 8 gistered agent and to acceptionated in this certificate, I	the registered : Savage Jame th Street, Suite : s (P.O. Box NOT ach, FLOR tote, and Zip of service of pro- hereby accept i	ingent are: i02 acceptable) iDA 33162 cess for the above state appointment as re	ted limited liability
The name and the been named as reg y at the place desi	Craig D. 801 NE 167 Florida street address of Craig D. 801 NE 167 Florida street address North Miami Base City, 8 gistered agent and to acceptionated in this certificate, I	the registered : Savage Jame th Street, Suite : s (P.O. Box NOT sch. FLOS tate, and Zip of service of pro- hereby accept if y with the provi	ingent are: 102 102 10A 33162 10S for the above state appointment as resident of all statutes resident of all statutes resident of all statutes residents.	nted limited liabilly gistered agent and elating to the prop
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The name and address of each Mana	ger or Managing Member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Yaran Lukshinaki	
	754 NE 167th Street	
	North Miami Beach, Fla. 33182	_
MGRM	Charlie Paul Laloum	
	754 NE 187th Street	_
	North Miami Beach, Flg. 33162	
	·	
		_
(Use attachment if necessary)		

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

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 perjuty that the facts stated herein are true.)

Craig D. Savage
Typed or printed name of signer

Filter Francis

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optionsi)

\$ 5.00 Certificate of Status (Optional)

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