

L04000026517

FILED

Florida Department of State
Division of Corporations
Public Access System

2004 APR -7 A 8:45

Electronic Filing Cover Sheet

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000073554 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

LIMITED LIABILITY COMPANY

R & P Development, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

AL

Electronic Filing Menu

Corporate Filing

Public Access Help

FILED

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

2004 APR -7 A 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE I - Name:**

The name of the Limited Liability Company is:

R & P DEVELOPMENT, LLC**ARTICLE II - Address:**

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

Principal Office Address:Mailing Address:5861 12th Ave. S.W.5861 12th Ave. S.W.Naples, Florida 34116Naples, Florida 34116**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Patrick W. Rose

Name

5861 12th Ave. S.W.Florida street address (P.O. Box NOT acceptable)NaplesFLORIDA 34116

City, State, and Zip

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.

By: 

Registered Agent's Signature

FILED

2004 APR -7 A 8:45

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**Title:****Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

MGRMPeter R. Safino5887 Arboles StreetSan Diego, California 92120MGRMPatrick W. Rose5861 12th Ave. S.W.Naples, Florida 34116

(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.)

PETER R SAFINO

Typed or printed name of signer

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)