

L04000033465

(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:



000033603440

04/26/01 -01037--010 \*\*130.00

FILED

2004 APR 26 A 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Office Use Only

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RnD Investments, 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:

Rosanne Knorr

(Name of Person)

(Firm/Company)

7667 Pesaro Drive

(Address)

Sarasota, Florida 34238

(City/State and Zip Code)

For further information concerning this matter, please call:

Rosanne Knorr

(Name of Person)

at ( 941 )

921-2104

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2004 APR 26 A 8:47

FILED

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

RnD Investments, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

7667 Pesaro Drive

Sarasota, FL 34238

**Mailing Address:**

7667 Pesaro Drive

Sarasota, FL 34238

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

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

Rosanne Knorr

Name

7667 Pesaro Drive

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

Sarasota

FLORIDA 34238

City, State, and Zip

**FILED**  
2009 APR 26 A 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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

Rosanne Knorr

7667 Pesaro Drive

Sarasota, FL 34238

MGRM

Charles David Zimmerman

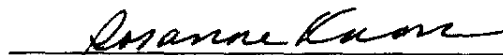
509 Summerfield Way

Sarasota, FL 34292

(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.)

Rosanne Knorr

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  
2004 APR 26 A 8:47  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE