

L04000056572

(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:

Name
Availability

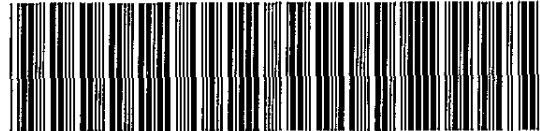
Document
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07/27/04--01002--018 **160.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 JUL 27 P 1:19

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Dear Sir/Madam:

The attached document(s) are being returned for reason(s) indicated below. Correct the attached DWC 250, as requested and return with this letter. If you have any questions, call (813) 221-6506.

Be sure to return all items as we did not retain a copy of the attached document(s).

Limited Liability Companies are automatically exempt from filing the DWC 250 under Chapter 440 F.S. Also, the money order is being returned in the amount of \$160.00 because there is no fee required. Please do not send back the application if you are not a coporation.

Thank You,

Janyne Scrivens
Janyne Scrivens

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2009 JUL 27 P 6 19

SECRETARY OF
TALLAHASSEE, FL 32314

1-850-245-6050

Div. of Corporation
PO Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

RECEIVED

JUL 9 2004

BUREAU OF COMPLIANCE
TAMPA

ARTICLE I - Name:

The name of the Limited Liability Company is:

R & R Harvesting L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

2202 N. Johnson St.

Plant City, Florida 33566

Mailing Address:

SAME

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

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

RUBEN M. RODRIGUEZ

Name

2202 N. Johnson Street

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

Plant City, Fl. 33566

FLORIDA

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

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JUL 19 2004

BUREAU OF COMPLIANCE
TAMPA

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:

MGR

Ruben M. Rodriguez

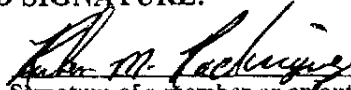
2202 N. Johnson Street

Plant City, FL 33566

(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.)

Ruben M. Rodriguez

Typed or printed name of signee

SECRETARY OF STATE
TAMPAH/ASSEMBLY

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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)