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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		-
SUBJECT: R&W DEVELOPEMENT	Т	
	lame of Limited Liability Company)	
The enclosed Articles of Organization a	and fee(s) are submitted for filing.	
Please return al	Il correspondence concerning this matter to the following:	
CHERIE ROBERTS		<u>.</u>
	(Name of Person)	•
R&W DEVELOPEMENT	T _	
	(Firm/Company)	
6350 COCOA LANE		
	(Address)	3
APOLLO BEACH FI	L. 33572	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(City/State and Zip Code)	w l
For further information concerning this	matter, please call:	ים לים לים לים לים לים לים לים לים לים ל
CHERIE ROBERTS	at (813 ) 645-3321	2
(Name of Person)	(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



August 13, 2004

CHERIE ROBERTS R&W DEVELOPEMENT 6350 COCOA LANE APOLLO BEACH, FL 33572

SUBJECT: R & W DEVELOPEMENT

Ref. Number: W04000031014

We have received your document for R & W DEVELOPEMENT and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 204A00050290

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
R&W DEVELOPEMENT LLC		
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
6350 COCOA LANE	6350 COCOA LANE	
APOLLO BEACH FL. 33572	APOLLO BEACH FL. 33572	
	· ·	
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered of the registered Agent, Registered Office The name and the Florida street address of the registered of the registered Agent, Registered Office  CHERIE ROBERTS  Name  6350 COCOA LANE  Florida street address (P.O. Box	AFTARY OF STATE	
APOLLO BEACH FL. 33572  City, State, and Zip	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

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	<u>.</u> .
"MGR" = Manager "MGRM" = Managing Member		
MGR	"Joyce Wilson	ुर्द्धान र सम्बद्ध
	1029 Bal Harbour	e de la companya del companya de la companya del companya de la co
	Apollo Beach, FL 33572	a the transfer of the second
MGR	Cherie Roberts	e services and
	6350 Cocoa Lane	
	Apollo Beach, FL 33572	
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(Use attachment if necessary)	SECR	MANON THOUSE
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REQUIRED SIGNATURE:		_
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Signature of a member or an	authorized representative of a member.	· <del>····</del>
(In accordance with section 60	8.408(3), Florida Statutes, the execution	
	affirmation under the penalties of perjury	
Joyce Wilson		
	winted name of ciones	

### 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)