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(Requestor's Name)	
(Address)	700037810137
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	03/27/0401035021 **160.00
(Document Number)	
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TRANSMITTAL LETTER

FILED

TO:	Registration Section Division of Corporations	²⁰⁰⁴ SEP 2	
SUBJE	ECT: R & S Investments, LLC	ZOOU SEP 2 SECRETARY TAILLAHASSE	
	(Name of Limited Liability Company)	THASSE	
The end	closed Articles of Organization and fee(s) are submitted for filing.		
	Please return all correspondence concerning this matter to the following:		
Reginald Franklin, Sr.			
	(Name of Person)		
R & S Investments, LLC			
	(Firm/Company)		
P. O. Box 672			
	(Address)		
Mango, FL 33550-0672			
	(City/State and Zip Code)		
For furt	ther information concerning this matter, please call:		
Reg	ginald Franklin, Sr. at (813) 689-8670		

STREET ADDRESS:

(Name of Person)

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR

FILED

FLORIDA LIMITED LIABILITY COMPANY 2004 SEP 27 P 1: 49

ARTICLE I - Name: The name of the Limited Liability Con	any is: SECRETARY OF STAT TALLAHASSEE, FLORIC
R & S Investments, LLC	TOUR!
ARTICLE II - Address: The mailing address and street address	f the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5304 Orange Ave	P O Box 672
Seffner, FL 33584	Mango, FL 33550-0672
ARTICLE III - Registered Agent, R The name and the Florida street address	istered Office, & Registered Agent's Signature: of the registered agent are:
The name and the Florida street address	
The name and the Florida street address	of the registered agent are: Franklin
The name and the Florida street address Sonia	of the registered agent are: Franklin Name
The name and the Florida street address Sonia 5304 Florida street a Seffne	Franklin Name ange Ave. ress (P.O. Box NOT acceptable) FLORIDA 33584
The name and the Florida street address Sonia 5304 Florida street a Seffne	Franklin Name ange Ave. ress (P.O. Box NOT acceptable)
Sonia Sonia 5304 Florida street a Seffne been named as registered agent and to a my at the place designated in this certifica act in this capacity. I further agree to complete performance of my duties, and I a	Franklin Name ange Ave. ress (P.O. Box NOT acceptable) FLORIDA 33584

Page 1 of 2 (CONTINUED)

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

FILED

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

Title:	Name and Address:	2004 SEP 27 ₱ 1: 49
"MGR" = Manager		
"MGRM" = Managing Member		SECRETARY OF STATE TALLAHASSEE, FLORIDA
Manager	Reginald Franklin, Sr.	THE SELF I LORIDA
	5304 Orange Ave.	
	Seffner, FL 33584	
Managing Member	Sonia M. Franklin	
	5304 Orange Ave.	
	Seffner, FL 33584	
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(Use attachment if necessary)		
(Obe and mineral in necessary)		
NOTE: An additional article mus	the added if an effective date i	s requested.
REQUIRED SIGNATURE:		
70 TT X		
Signature of a member or	an authorized representative of a mo	ember.
	n 608.408(3), Florida Statutes, the exect s an affirmation under the penalties of p are true.)	
Re	ginald Franklin, Sr.	

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)

Typed or printed name of signee