

L05000008196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

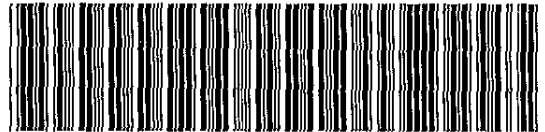
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*[Handwritten signature]*

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**FILED**  
05 JAN 26 PM 5:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RECEIVED**  
05 JAN 26 PM 1:07  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- RGA HOLDINGS, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

### AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

### OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

### REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

FILED  
05 JAN 26 PM 5:17  
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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
RGA HOLDINGS, LLC.,  
a Limited Liability Company**

**FILED**  
05 JAN 26 PM 5:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I  
Name**

The name of the Limited Liability Company is: RGA Holdings, LLC.

**ARTICLE II  
Address**

The mailing address and street address of the principal office of the Limited Liability Company is: 2240 Venetian, Naples Florida 34109.

**ARTICLE III  
Duration**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV  
Management**

The Limited Liability Company is to be managed by a Managing Member or Managing Members, except to the extent the discretion, authority or power to make the decisions is reserved to the Members in the Company's Regulations.

**ARTICLE V  
Requirement that the Regulations be in Writing**

All Regulations relating to this Limited Liability Company must be in writing and signed by all of the Members.

**ARTICLE VI  
Registered Agent and Office**

The name of the Company's initial registered agent in Florida is:  
Richard L Armalavage, 2240 Venetian, Naples Florida 34109.

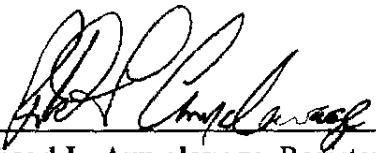
IN WITNESS WHEREOF, I have signed these Articles this 20<sup>th</sup> day of January, 2005.

  
Richard L. Armalavage, Member

### ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above-stated limited liability company, at the place designated in Article VI of these Articles of Organization, the undersigned party hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of his duties.

Dated this 20<sup>th</sup> day of January, 2005.

  
Richard L. Armalavage, Registered Agent