Florida Department of State

Division of Corporations Public Access System

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LIMITED LIABILITY COMPANY

R Lapidus LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION FOR

*	TOP			
	FLORIDA LIMITED LIA	BILITY COMPANY		
ARTICLE I - Name				
The name of the Limited Liability C	ompanyis: R Lapidus I	LC		
	-			
ARTICLE II - Address				
The mailing address and street address	ess of the principal office of the	Limited Liability Company is:		
•				
Principal Office Address:	M	ailing Address:		
				
2908 56th Street South		908 56th Street South		
Gulfport FL 33707	G	ulfport, FL 33707		
		_		
		. 11		<u> </u>
ARTICLE III - Registered A		& Registered Agent's Sigr	nature	
The name and Florida street address	of the registered agent are:			
	Robert Lapidus			
		Name	 ·	

	2908 56th Street So			
	(P.O. Box or Mail!	Drop Box <u>NOT</u> Acceptable)		
	51 10 · · · · · · · · · · · · · · · · · ·		₹ ∞ ≥	}
	Gulfport, FL 33707	2	_ FS 등	
	(City /	suite / Lip)		
Having been named as registered	• •	-,	Himited liabil	ty company
	agent and to accept service of	f process for the above stated		
at the place designated in this cer	agent and to accept service of tificate, I hereby accept the a	of process for the above stated ppointment as registered agen	it and agree to	act in this
Having been named as registered at the place designated in this cer capacity. I further agree to compl of my duties, and I am familiar wi	agent and to accept service of tificate, I hereby accept the a y with the provisions of all sta	of process for the above stated appointment as registered agenutates relating to the proper a	it and agree to nd completed	act in this erformance
at the place designated in this cer capacity. I further agree to compl of my duties, and I am familiar wi	agent and to accept service of tificate, I hereby accept the a y with the provisions of all sta	of process for the above stated appointment as registered agenutates relating to the proper a	it and agree to nd completed	act in this erformance
at the place designated in this cer capacity. I further agree to compl of my duties, and I am familiar wi	agent and to accept service of tificate, I hereby accept the a y with the provisions of all sta	of process for the above stated appointment as registered agenutates relating to the proper a	it and agree to nd completed	act in this erformance
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at the place designated in this cer capacity. I further agree to compl of my duties, and I am familiar wi	agent and to accept service of tificate, I hereby accept the a y with the provisions of all sta	of process for the above stated appointment as registered agenutates relating to the proper a	it and agree to nd completed	act in this erformance

Registered Agent's Signature - Robert Lapidus

The name and address of each M	anager or Managing Member is as follows:	
<u>Title:</u> "MGR"=Manager "MGRM"=Managing Member	Name and Address:	
MGRM	Robert Lapidus- 2908 56th Street South, Gulfpor	1, FL 33707
(Use attachment if necessary)	•	
REQUIRED SIGNATURE: Signature	re of a member of authorized representative of a mem	iber.
document	dance with section 608.408(3), Florida Statutes, the exe constitutes an affirmation under the penalties of perju ein are true.)	
	Robert Lapidus	2005 FEB SECRETALLAHA
	Typed or printed name of signee	B 24 AM 9: 49 THRY OF STATE ASSEE, FLORIDA