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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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OS NAY -9 PN 4: 1:
SECRETARY OF STATE



TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT: RS1 LLC			
		d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Steven F	riedland		
		Name of Person)	
RS1 LLC			
	C	Firm/Company)	FILED O5 WAY -9 PW 4: 17 SECRETARY OF STATE TALLAHASSEE FLORIDA
			LEG = T
2817 N.E. 2	Oth Court		題。一
		(Address)	1 6 5 SS
			표유 골 다
Fort I	auderdale, Florida 33305		ED PN 4: 1
roit L		State and Zip Code)	—
	, ,	• ,	>
For further information	concerning this matter, please	call:	
Steven Friedland		at (954) 529-6150	
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STRE	ET ADDRESS:	MAILING A	DDRESS:
	ration Section	Registration S	
	on of Corporations . Gaines Street	Division of Co P.O. Box 632'	
	assee, Florida 32399	Tallahassee, F	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	x:
RS1 LLC	
ARTICLE II - Address: The mailing address and street address of the I	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13899 Biscayne Blvd. Suite 156	13899 Biscayne Blvd. Suite 156
N. Miarni Beach, FL 33181	N. Miami Beach, FL 33181
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the Steven Friedland	registered agent are:
Nam	e Egg
2817 N.E. 20th Court	
Florida street address (P.O. Box NOT acceptable)	
Fort Lauderdale, FL 33305	FL
City, State	and Zip
liability company at the place designated in	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further acree to comply with the provisions of all

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, F.S..

Registered Agent's Signature

(CONTINUED)

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Rick Tuckerman
	13899 Biscayne Blvd. Suite 156 N. Miami Beach, FL 33181
MGRM	Steven Friedland
	2817 N.E. 20th Court
	Fort Lauderdale, FL 33305
	TO ST
(Use attachment if necessary)	AFTER 19
NOTE: An additional article must be	
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated herein	a 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)
Steven Friedland	

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)