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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Ron-Chaire Enter Prises, LLC (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
RON GURNLY (Name of Person)		
RON-CLaire Enterprises LLC		
312 East 64 Street		
Higleah FL 33013 (City/State and Zip Code)		
For further information concerning this matter, please call:		
RON GURNEY at 305 456-0040 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee Certificate of Status  ☐ \$130.00 Filing Fee Certified Copy (additional copy is enclosed)  ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)		
STREET ADDRESS: MAILING ADDRESS:		

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

0.3
ARTICLE I - Name: The name of the Limited Liability Company is:
RON-Claire Enterprises LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is
Principal Office Address:  Mailing Address:
312 East 64 Street Hialegh, FC 33013 Hialegh, FC 33013
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
RON GUINEY Name
212 Face 64 Street

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, F.S..

Florida street address (P.O. Box NOT acceptable)

(CONTINUED)

Page 1 of 2

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	Name and Address:
"MGRM" = Managing Member	
MGR	RONI GURNEY 312 East 64 Street Higher FL 33013
MGRM	Maria Gurney 312 East by street
	Higheah, FC 330 170 B
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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

Man Zumer.

Menature of a member of an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Pow Gurney

Typed or printed name of signs

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)