L05000072878

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

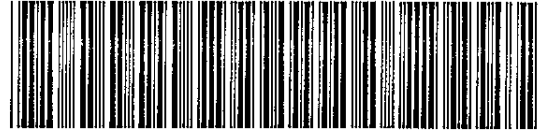☐ PICK-UP ☐ WAIT ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: R & B Vending, L.L.C.

(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:

Auston Bunsen or Renato Rosas

(Name of Person)

(Firm/Company)

8281 NW 67th Avenue

(Address)

Tamarac, Florida, 33321

(City/State and Zip Code)

For further information concerning this matter, please call:

Auston Bunsen _____ at (754) 214-4020

(Name of Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee   ☐ $130.00 Filing Fee &   ☐ $155.00 Filing Fee &   ☒ $160.00 Filing Fee,
                  Certificate of Status   Certified Copy   Certificate of Status &
                                       (additional copy is enclosed)   Certified Copy
                                                       (additional copy is enclosed)

STREET ADDRESS: **MAILING ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
409 E. Gaines Street   P.O. Box 6327
Tallahassee, Florida 32399   Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

R & B Vending, L.L.C.

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

8281 NW 67TH AVE

TAMARAC, FL, 33321

Mailing Address:

8281 NW 67TH AVE

TAMARAC, FL, 33321

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Auston Bunsen

Name

8281 NW 67th Ave

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

Tamarac, FL , 33321

City, State, and Zip

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..

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:

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SECRETARY OF STATE
TALLAHASSEE, FLORID:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	Auston F. Bunsen
	8281 NW 67th Ave
	Tamarac, Fl, 33321
MGR	Renato Rosas
	8281 NW 67th Ave
	Tamarac, Fl, 33321

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

_____
Signature of a member or 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.)

Renato Rosas
_____
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)