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2005 SEP 11	P 12: 46
TACLAMAIS	
(Requestor's Name)	
(Address)	000059545990
(Address)	0000000-0000
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	09/13/0501020002 **160
(Document Number)	
Certified Copies Certificates of Status	
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Office Use Only

COVER LETTER			
TO: Registration S Division of C			295 E 13 P 15
SUBJECT: R	CB INVESTME	ents LLC I Liability Company)	T. T. T. S.
The enclosed Articles	of Organization and fee(s) are su	ubmitted for filing.	
Please return all corres	pondence concerning this matte	r to the following:	
Kich	ard Bearq	eon l	······
	t,	vaine of Person)	
	•	Firm/Company)	
4500	44 th St. Etersburg F	<u>S.</u>	
-1-	>/	(Address)	
$\geq t.t.$	etersburg (City	State and Zip Code)	
For further information	n concerning this matter, please	call:	
Kichard (Nan	e of Person)	at (727) 867 (Area Code & Daytime T	2987 elephone Number)
Enclosed is a check	for 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)
	Mailing Address	Street/Courier Addre	<u>ss</u>

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RCB Tave< free LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4500 444 54. 5.

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Kichard Beargeon

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

St. Peleus Lurg FL 33711

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 (REOUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or	Managing Member(s):	i na na tuga <u>Ell</u>
The name and address of each M	Managing Member(s): Ianager or Managing Member is as f	ollows: 2005 SEP 13 P 12: 1114
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	MULAHASSAT, FLORIDA
MGR	Richard Be	eargeon
MGR	Cheryl Be 4500 x47h St.	argeon 5.
(Use attachment if necessary) ICLE V: Effective date, if other tha effective date is listed, the date me days after the date of filing.)	n the date of filing: ust be specific and cannot be more t	(OPTIONAL)
REQUIRED SIGNATURE:		
Signature of a m	land January ember or an authorized representative o	f a member.
of this document	ith section 608.408(3), Florida Statutes, the constitutes an affirmation under the penalticated herein are true.) Typed or printed name of signee	execution es of perjury
Filing Fees:	California in the Arministra	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)