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| PICK-UP WAIT | MAIL |
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| Certified Copies Certificates | of Status |
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| Special Instructions to Filing Officer: | |
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SECRETARY OF STATE
SECRETARY OF FLORIDA

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| | | COVE | R LETTER | |
|-------------------|----------------------------------|---|--|--|
| | Registration S Division of Co | | | |
| SUBJEC | Т: | RNL Enterpri | ises LLC | |
| | | (Name of Limite | d Liability Company) | |
| The enclo | sed Articles o | of Organization and fee(s) are s | submitted for filing. | |
| Please ret | urn all corresp | condence concerning this matte | er to the following: | |
| | | Walter R. R | | |
| | | (| Name of Person) | |
| | | RNL Enterpr | ises LLC | |
| | | (| (Firm/Company) | |
| | | 6238 Harcre | oss Court | |
| | | | (Address) | |
| | | Spring Hill, FL | 34606-5612 | |
| | | | /State and Zip Code) | |
| For furthe | r information | concerning this matter, please | call: | |
| Walt | er R. Ri | ebau | at (352) 683-14 | 03 |
| | (Name | e of Person) | (Area Code & Daytime T | elephone Number) |
| Enclosed | is a check fo | 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) |
| | | Mailing Address | Street/Courier Address | <u>. </u> |

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limit | ed Liability Company is: | | |
|--|---|--|---|
| | Enterprises LLC mited Liability Company, "Limited | d Company" or their abbreviation "LLC," or "L.C.," | ') |
| ARTICLE II - Addre The mailing address an | | ncipal office of the Limited Liability Co | ompany is: |
| Principal Office Addı | ress: | Mailing Address: | |
| 6238 Harcross Court Spring Hill, FL 34606-5 | 612 | 6238 Harcross Court Spring Hill, FL 34606-5612 | |
| The Limited Liability Compa business entity with an active | ny cannot serve as its own Register e Florida registration.) ida street address of the re | | |
| | Walter R. Riel | oau | Fo G |
| · | 6238 Harcross | s Court ress (P.O. Box <u>NOT</u> acceptable) | OS SEP 30 PM |
| | Spring Hill, | FL 34606-5612 | 至 |
| Having been named a | City, State, and so a registered agent and to a | nd Zip accept service of process for the above sta | 1015 1015 1015 1015 |
| liability company a registered agent and a statutes relating to th | t the place designated in the gree to act in this capacity ne proper and complete per | nis certificate, I hereby accept the appoint. I further agree to comply with the proving formance of my duties, and I am familiantered agent as provided for in Chapter 60 | tment as isions of all r with and |

(CONTINUED) Page 1 of 2

| ARTICLE | IV. Manao | er(s) or | Managing | Member | (e): |
|---------|------------|----------|------------|------------|--------|
| AKIICLE | BA-IATMENS | CITALI | MINIMARINA | TATCHISMET | , S) - |

The name and address of each Manager or Managing Member is as follows:

| MGR | Walter R. Riebau 6238 Harcross Court Spring Hill, FL 34606-5612 |
|-----------------------------|---|
| MGRM | Leone A. Riebau |
| | 6238 Harcross Court Spring Hill, FL 34606-5612 |
| | |
| | |
| | |
| | |
| (Use attachment if necessar | у) |
| | er than the date of filing: (OPTION ate must be specific and cannot be more than five business date.) |

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.)

Walter R. Riebau
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)