L05000104916

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Office	F)16
		10/10,
	·	

Office Use Only



800060859168

10/24/05--00/26--005 **125.00

SECHER SIAIT

001 24 #3 IP 30



TRANSMITTAL LETTER

TO:	Registration S Division of C			
SUBJE	CT: R&NN		ted Liability Company)	
		(* 32 <u>22</u> .		
The enci	osed Articles o	of Organization and fee(s) are	submitted for filing.	
Please re	turn all corres	pondence concerning this mat	ter to the following:	
	Ronald	Myers		
			(Name of Person)	
R&N	Myers, LLC			
			(Firm/Company)	
	7103 SE 17	2nd Hazelwood Loop		
		·	(Address)	
	The \	/illages, FL 32162		
			//State and Zip Code)	-
For furthe	er information	concerning this matter, please	call:	
	_		754 5005	
Ronald I		of Person)	at (352) 751-5685 (Area Code & Daytime T	Calambana Niverban
	(Mame	or reison)	(Area Code & Daytime 1	etepnone (vumber)
Enclosed	is a check fo	r the following amount:		
Ø \$125.0	0 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 on of Corporations	Registration S Division of Co	

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 F	FOR FLORIDA LIMITED LIAB	ILITY COMP	ANY
ARTICLE I - Name:			
The name of the Limited Liability Com	pany is:		
R & N Myers, LLC			
R & N lwyers, LLC			
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited	Liability Compa	any is:
Principal Office Address:	Mailing Address:		
7103 SE 172nd Hazelwood Loop	7103 SE 172nd Hazelwood Lo	оор	
The Villages, FL 32162	The Villages, FL 32162		
ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent	t's Signature:	
The name and the Florida street address	of the registered agent are:		
Ronald Myers			0
	Name	Æ. E.	5

7103 SE 172nd Hazelwood Loop Florida street address (P.O. Box NOT acceptable) The Villages 32162 City, State, and Zip

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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:	<u>Name</u>	and Address:		
"MGR" = Manag "MGRM" = Man				
MONIVI — Mai	aging Member			
MGRM	Ronal	d Myers		
	7103 \$	SE 172nd Hazelwood Loop		
	The Vi	llages, FL 32162	<u> </u>	
MGRM	Nancy	F Myers		
	7103 \$	SE 172nd Hazelwood Loop		
	The Vi	llages, FL 32162		
	<u> </u>		_	
				
(Use attachment i	f necessary)			
NOTE: An addi	tional article must be added i	f an effective date is requested.		
	NAT 4 PERFECTANT		ΣS	(
REQUIRED SIG	NATURE:		ΣS	1
~	nancy 7 Mi		ASSI	
	Signature of a member or an author	prized representative of a member.	H, '	
	(In accordance with section 608.408)	(3), Florida Statutes, the execution	P P P	
of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)		nation under the penalties of perjury)	BA	
	Nancy F Myers			
	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)

Page 2 of 2