

LO50000113504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Office Use Only



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02/21/05--01018--005 \*\*18.15

11/21/05--01006--020 \*\*46.25

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 NOV 21 PM 12:38

LLC

FF \$125



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

March 1, 2005

LORI A. GIGANTE  
6298 POMPANO STREET  
JUPITER, FL 33458

SUBJECT: A BALANCING ACT, INC.  
Ref. Number: W05000010266

We have received your document for A BALANCING ACT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6929.

Justin M Shivers  
Document Specialist  
New Filings Section

Letter Number: 605A00013979

November 11, 2005

Florida Department of State  
Division of Corporations  
P.O. BOX 6327  
Tallahassee, Fl. 32314

**Re: W05000010266**

On March 1, 2005 I received a letter from you stating that the company name I had chosen was too close to another name that was already registered. I would like to have the following changes made to my original request.

1. Instead of a corporation I would like to open a Limited Liability Company.
2. I would like the company to be named "Rainbow 21, LLC"
3. The address and the Officers name have changed. Please see attached "Articles of Organization for Florida Limited Liability Company"

I understand that the cost for filing my corporation originally was \$78.75. And the filing for LLC is \$125.00. Please find check number 106 for the difference of \$46.25.

Thank you for your time and attention to this matter. If you need any further information, please feel free to contact me or Angelica Sigler at 305-332-2793 or via email at [angiesigler@bellsouth.net](mailto:angiesigler@bellsouth.net)

Sincerely,

  
Lori Gigante

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RAINBOW 21, 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:

ANGELICA SIGLER  
(Name of Person)

(Firm/Company)

2627 S.W. 29 AVENUE  
(Address)

MIAMI, FL. 33133  
(City/State and Zip Code)

For further information concerning this matter, please call:

ANGELICA M. SIGLER at 305 332-2793  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|---|

Already  
Previously  
Paid

Ref. # W05000010266

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 Limited Liability Company is:

RAINBOW 21, 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:

2627 S.W. 29 Ave.  
Miami, FL 33133

#### Mailing Address:

2627 S.W. 29 Ave.  
Miami, FL 33133

### 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:

ANGELICA M. SILER

Name

2627 S.W. 29 Ave.

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

Miami, FL 33133

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Angelica Sigler

2627 S.W. 29 Ave.

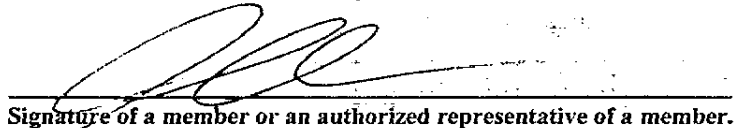
Miami, FL 33133

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 11/10/05 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

Angelica Sigler  
Typed or printed name of signer

**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)

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