

**L060000057139**

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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.  
Account Number : I20010000215  
Phone : (904)777-1533  
Fax Number : (904)777-1717

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**R Celestin, LLC**

Certificate of Status	1
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I. NAME:

The name of the Limited Liability Company is: **R Celestin, LLC**

### ARTICLE II. ADDRESS:

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

11555 Summer Bird Court  
Jacksonville, FL 32211

32211

### ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

Ricka Celestin  
11555 Summer Bird Court  
Jacksonville, FL 32211

32211

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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, Florida Statutes.*

  
Ricka Celestin/ Registered Agent

  
Date

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**ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):**

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title:  
MGR.

Name and Address:  
Ricka Celestin  
11555 Summer Bird Court  
Jacksonville, FL 3221

32221

**REQUIRED SIGNATURE:**

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this 2 day of JUNE, 2006.

  
Ricka Celestin, Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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TALLAHASSEE, FLORIDA

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