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CIVISION OF CORPORATIONS

106 JUL -5 PM 4: 35

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: R.A. N	Noffett, LLC		
		d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Barbara 7	Γ. Moffett		06 7
	(Name of Person)	06 JUL -5
			, U
	(Firm/Company)	R
5911 S.V	V. 62nd Place		Ŧ
	<u> </u>	(Address)	
South Mi	iami, Florida	33143 - 2114	
-	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Barbara T. Mo	ffett	at (305) 302-29	77
(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for	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 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
R.A. Moffett, 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 principal office of the Limited Liability Compar
rincipal Office Address: Mailing Address:
1 South Shell Road DeBary, Florida 32713 Outh Miami, Florida 33143 - 2114
ARTICLE III - Registered The Limited Liability Company cannot business entity with an active Florida re
The name and the Florida street a surface the registered agent are:
Barbara T. Moffett
Name
5911 S.W. 62nd Place Florida street address (P.O. Box NOT acceptable)
South Miami FL 33143 - 2114 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