

W06000068851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

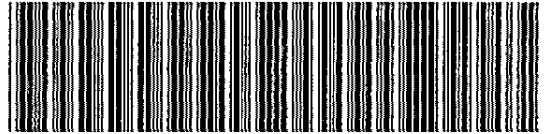
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W06-68851  
OK

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RC Distributors LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Craig Cohen

(Name of Person)

(Firm/Company)

21130 NE 19 Avenue

(Address)

N. Miami Beach, FL 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

Craig Cohen

(Name of Person)

at ( 305 )

866-5050  
(Area Code & Daytime Telephone Number)

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

CR2B062 (08/05)

2006 JUL 28 PM 2:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
RC DISTRIBUTORS LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

INCORRECT NAME: RC DISTRIBUTORS LLC

CORRECT NAME: RC DISTRIBUTION LLC

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of a member or authorized representative of a member

CRAIG COHEN

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

2006 JUL 28 PM 2:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L06000068851  
FILED 8:00 AM  
July 11, 2006  
Sec. Of State  
gharvey

**Article I**

The name of the Limited Liability Company is:  
RC DISTRIBUTORS LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
21130 NE 19 AVENUE  
N. MIAMI BEACH, FL. 33179

The mailing address of the Limited Liability Company is:  
21130 NE 19 AVENUE  
N. MIAMI BEACH, FL. 33179

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
CRAIG COHEN  
21130 NE 19 AVENUE  
N. MIAMI BEACH, FL. 33179

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.

Registered Agent Signature: CRAIG COHEN

### Article V

The name and address of managing members/managers are:

Title: MGR  
CRAIG COHEN  
21130 NE 19 AVENUE  
N. MIAMI BEACH, FL. 33179

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FILED 8:00 AM  
July 11, 2006  
Sec. Of State  
gharvey

Signature of member or an authorized representative of a member

Signature: CRAIG COHEN