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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION 2: 3'



COVER LETTER

TO: Registration Section Division of Corporat				
SUBJECT: Rainbow I				
	(Name of Limite	d Liability Company)		
The enclosed Articles of Orga	anization and fee(s) are s	ubmitted for filing.		
Please return all corresponder	nce concerning this matte	r to the following:		
Richard M. G	aberman, Esq			_
	0	Name of Person)		
Robinson Do	novan P.C.			
****	(Firm/Company)		•
1500 Main S	Street, P.O. Bo	x 15609		
		(Address)	· · · · · · · · · · · · · · · · · · ·	•
Springfield,	MA 01115-56	09		
		State and Zip Code)		
For further information conce	rning this matter, please	call:		
Richard M. Gabern	nan. Esquire	_{at (} 413) 732-	2301	
(Name of Per			me Telephone Number)	
Enclosed is a check for the	following amount:			
	\$130.00 Filing Fee & tificate of Status	\$155.00 Filing Fee Certified Copy (additional copy is enclosed	Certificate of Status &	ZUUG JUL 21 PH
Rep Div P.C	niling Address gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314	Street/Courier Ad Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	n rations enter Circle	21 PM 2: 38

DIVISION OF CORPORATION

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Rainbow Realty 2006 LLC (Must end with the words "Limited Liability Company, "Limit	ted Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Comp	any is:
Principal Office Address:	Mailing Address:	
19815 Sea Rider Way Lutz, FL 33559	19815 Sea Rider Way Lutz, FL 33559	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another	
The name and the Florida street address of the	registered agent are:	67
Brian A. Zuckerman		SECRETAPE DIVISION OF 2006 JUL 2
Name		
19815 Sea Rider Way		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	dress (P.O. Box <u>NOT</u> acceptable)	Parent Constitution of the
Lutz, FL 33559 City, State, a	FL	24 SES
•	and Emp accept service of process for the above stated l	Y OF STATE OF PM 2: 38

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

Title:		Name and Address:	
"MGR" = Man	_		
"MGRM" = M	anaging Member		
MGR		Brian A. Zuckerman	
		19815 Sea Rider Way	
		Lutz, FL 33559	<u>. </u>
MGR		Martha W. Zuckerman	-
		19815 Sea Rider Way	
		Lutz, FL 33559	_
			
			
			_
			
			-
(Use attachmer	nt if necessary)		
	• •	e data of filing:	 IONAL)
CLE V: Effectiv	e date, if other than the	e date of filing: (OPTI	IONAL)
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Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)