

L 07000040362

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

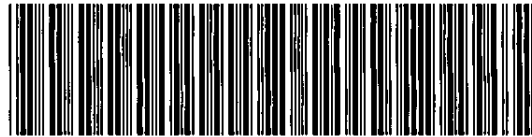
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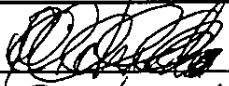
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
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Richard DeFilippo Solutions  
Development, LLC

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SECRETARY OF STATE

- ☐ Art of Inc. File \_\_\_\_\_
- ☐ LTD Partnership File \_\_\_\_\_
- ☐ Foreign Corp. File \_\_\_\_\_
- ☒ L.C. File \_\_\_\_\_
- ☐ Fictitious Name File \_\_\_\_\_
- ☐ Trade/Service Mark \_\_\_\_\_
- ☐ Merger File \_\_\_\_\_
- ☐ Art. of Amend. File \_\_\_\_\_
- ☐ RA Resignation \_\_\_\_\_
- ☐ Dissolution / Withdrawal \_\_\_\_\_
- ☐ Annual Report / Reinstatement \_\_\_\_\_
- ☐ Cert. Copy \_\_\_\_\_
- ☐ Photo Copy \_\_\_\_\_
- ☒ Certificate of Good Standing \_\_\_\_\_
- ☐ Certificate of Status \_\_\_\_\_
- ☐ Certificate of Fictitious Name \_\_\_\_\_
- ☐ Corp Record Search \_\_\_\_\_
- ☐ Officer Search \_\_\_\_\_
- ☐ Fictitious Search \_\_\_\_\_
- ☐ Fictitious Owner Search \_\_\_\_\_
- ☐ Vehicle Search \_\_\_\_\_
- ☐ Driving Record \_\_\_\_\_
- ☐ UCC 1 or 3 File \_\_\_\_\_
- ☐ UCC 11 Search \_\_\_\_\_
- ☐ UCC 11 Retrieval \_\_\_\_\_
- ☐ Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

W 4/16 3:45

Prepared by:  
Martocchio & DeFilippo, LLP  
3380 Woods Edge Circle, Suite 104  
Bonita Springs, Florida 34134

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
RICHARD DEFILIPPO SOLUTIONS DEVELOPMENT, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I  
NAME**

The name of the limited liability company shall be:  
**RICHARD DEFILIPPO SOLUTIONS DEVELOPMENT, LLC.**

**ARTICLE II  
ADDRESS**

The mailing address of the principal office of the company is: **823 NW 87th Ave  
Coral Springs FL 33071**

The street address of the principal office of the company is: **823 NW 87th Ave  
Coral Springs FL 33071**

**ARTICLE III  
REGISTERED OFFICE AND AGENT**

The name of the registered agent of the company in the state of Florida is **Nicholas DeFilippo**.

The street address of the registered agent of the company in the state of Florida is **Martocchio & DeFilippo, LLP, 3380 Woods Edge Circle, Suite 104, Bonita Springs, Florida 34134**.

*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 F.S. Chapter 608.*

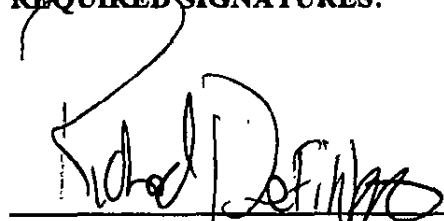
  
Signature of Registered Agent

**ARTICLE IV  
MANAGEMENT**

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

**Managing Member: Richard John DeFilippo**  
**Address: 823 NW 87th Ave**  
**Coral Springs FL 33071**

**REQUIRED SIGNATURES:**

A handwritten signature in black ink, appearing to read "Richard DeFilippo", written over a horizontal line.

**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.

**Richard John DeFilippo**

Typed or printed name