10000072639

| " (Re | equestor's Name) | <u> </u> | | |
|---|------------------|-------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | <u> </u> | | |
| (Cit | y/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Na | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | : | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



500105786695

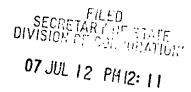
07/12/07---01017---004 **130.00

07 JUL 12 PM 12: 11

SECRETARY OF SUCH

COVER LETTER

| TO: Registration S Division of Co | | | | |
|--|---|--|----------|--|
| SUBJECT: RPM of the Keys, LLC | | | | |
| (Name of Limited Liability Company) | | | | |
| The enclosed Articles of | Organization and fee(s) are | submitted for filin | g. | |
| Please return all corresp | ondence concerning this matt | ter to the following | 3: | |
| Pamela S | Setchell | | | |
| (Name of Person) | | | | |
| Joe Miklas, P.A. | | | | |
| (Firm/Company) | | | | |
| P.O. Box 366 | | | | |
| (Address) | | | | |
| Islamorada, FL 33036 | | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please call: | | | | |
| Pamela Setchell at (3 | | at (305 | 852-7225 | |
| (Name | of Person) | (Area Code & Daytime Telephone Number) | | |
| Enclosed is a check fo | r the following amount: | | | |
| \$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy 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 Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | |



ARTICLES OF ORGANIZATION OF

RPM OF THE KEYS, LLC

ARTICLE I – Name: The name of the Limited Liability Company is RPM OF THE KEYS, LLC

ARTICLE II – Addresses: The mailing address of the Limited Liability Company is: P.O. Box 1632, Islamorada, FL 33036 and principal office of the Limited Liability Company is: 94401 Overseas Highway, Key Largo, FL 33037.

ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature: The name and Florida street address of the registered agent are:

Richard Perrulli 94401 Overseas Highway Key Largo, FL 33037

Having been named 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

ARTICLE IV – Managers or Managing Members: The name and address of each Manager or Managing Member is as follows:

Richard Perrulli – Member 94401 Overseas Highway Key Largo, FL 33037

Mary Jayne Perrulli – Member 94401 Overseas Highway Key Largo, FL 33037 ARTICLE V – Director of Special Projects: The name and address of the Director of Special Projects is as follows:

Narjol J. Proenza, Jr. - Director of Special Projects 94401 Overseas Highway Key Largo, FL 33037

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

Richard Perrulli