# L0700068856

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



500111306195

10/29/07--01040--018 \*\*125.00

7001 OCT 29 P 3: 35
SECRETARY OF STATE
ALL AHASSEFF. FI ORIDA

M

AL

## **COVER LETTER**

Division of Con					
SURJECT: Reality	y Jeweler's, LLC.				
Jobabett		d Liability Compa	ny)		-
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing	<b>.</b>		
Please return all corresp	ondence concerning this matte	r to the following:	:		
Eliodor <b>a</b> /	Acosta				
	(1	Name of Person)		SECRETARY ALLAHASSE	-11
Reality Je	eweler's, LLC.			RE TV	William Santa
	(	Firm/Company)		29 SSE	
601 SE 7	Thanksgiving Ave	е		EF T	_
		(Address)		ORIII	J
Port St L	ucie, FL 34984			> 0m 0	7
	(City,	State and Zip Code	)	•	
For further information	concerning this matter, please	call:			
Eliodora Acost	a	at ( 772 (Area Code	626-45	27	
(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	&  \$\sum \$155.00 \text{ Filing Fee & Certified Copy} (additional copy is enclosed)		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
٠.	Registration Division Clifton B 2661 Exe	ourier Addression Section of Corporatiouilding cutive Center ee. FL 32301	ns · Circle		

## Articles of Organization Of REALITY JEWELER'S, LLC.

The undersigned certify that we have associated ourselves together for the purpose of forming a Limited Liability Company under the laws of the state of Florida, for profit.

#### Article I -Name & Principal Place of Business

The name of the limited liability company is: Reality Jeweler's, LLC. and the mailing address is 601 SE Thanksgiving Ave., Port Saint Lucie, FL, 34984.

#### **Article II - Duration**

The duration of the limited liability company shall be perpetual unless terminated operation of law or as provided in these Articles or the Operating Agreement of Limited Liability Company.

# Article III -Initial Registered Office & Registered Agent

The mailing address of the initial registered office, and principal place of business, if the limited liability company is 601 SE Thanksgiving Ave., Port Saint Lucie, FL; 34984. The name of the registered agent is Eliodoro Acosta.

#### Article IV - Member Restrictions-Admissions

Additional persons or entites may be admitted to the limited liability company as members upon the unanimous consent of the current members and on such terms and conditions as determined by the members and in accordance with these Articles and the Operating Agreement of the limited liability company.

#### Article V - Right to Continue Business

On death, withdrawal, resignation, expulsion, bankruptcy or dissolution of a member, or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the remaining members shall have the right to continue the business on the consent of the majority (or all) of the remaining members within 90 days of the terminating or dissolving event.

# Article VI- Management

The name and address of each Managing member is as follows:

MGRM: Eliodoro Acosta, 601 SE Thanksgiving Ave., Port Saint Lucie, FL, 34984. MGRM: Marie D. Acosta, 601 SE Thanksgiving Ave., Port Saint Lucie, FL, 34984. MGRM: Maryann Acosta, 601 SE Thanksgiving Ave., Port Saint Lucie, FL, 34984.

In witness whereof, the undersigned, being an original member of the limited liability company, certifies that this instrument constitutes the proposed Articles of Organization of Reality Jeweler's, LLC.

Executed by the undersigned this 25<sup>th</sup> day of October, 2007.

Eliodoro Acosta

Article VII- Registered Agent, Registered Office, & Registered agent Signature

The mailing address of the registered office and principal place of business, of the line liability company is 601 SE Thanksgiving Ave., Port Saint Lucie, FL, 34984. The name of the registered agent is Eliodoro Acosta.

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 appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all the statues 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 provided for in chapter 608 Florida Statutes.

Registered Agent Signature

Eliodoro Acosta