Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : THE TAX COMPANY Account Number : 120070000061 Phone : (954)725-0900

Fax Number : (954)692-3411

OT NOV 29 AM 8: 17
SECRETARY OF STATE PLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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RCAA Holdings, LLC

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Corporate Filing Menu

Help

11/28/2007

COVER LETTER

TO: Registration \$ Division of Co					
SUBJECT: RCAA	Holdings, LLC			1	
-	(Name of Limi	ted Liability Compa	any)		•
The enclosed Articles of	Organization and fee(s) are	submitted for filing	₹.		
Please return all corresp	ondence concerning this ma	tter to the following	μ		
Selomite M	1edeiros				
		(Name of Person)			-
THE TAX	COMPANY, LLC				0
		(Firm/Company)			- 51 103 Z
461 E. HIL	LSBORO BLVD	STE 200		ŕ	OT NON 29 AM 8: 17 SECRETARISEE FLORID SECRETARISEE FLORID
		(Address)			100
DEERFIEL	D BEACH FL 33	3441			HQ E
	(Ci	ty/State and Zip Code)		ESTA GE
For further information of	oncerning this matter, pleas	e call:			夏雨 一
Selomite Mede		at 954	725-090		
(Nате	of Person)	(Area Cod	e & Daytime Tele	phone Number)	
Enclosed is a check for	r the following amount:				
✓ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155,00 Filin Certified Cop (additional copy	ру	\$160.00 Filling Fee, Certificate of Status & Certified Copy (additional copy is enclosed	,
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division (Clifton B 2661 Exe	on Section of Corporations uilding cutive Center Cee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:	
RCAA Holdings, LLC		
(Must end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	of the principal office of the Limited Lie	bility Company is:
Principal Office Address:	Mailing Address:	
5410 SW 134 Ave	5410 SW 134 Ave	<u>9</u>
Miramar, FL 33027	Miramar, FL 33027	750 Z

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

The Tax Company

Name

461 E. HILLSBORO BLVD STE 200

Florida street address (P.O. Box NOT acceptable)

DEERFIELD BEACH 近 33441

City, State, and Zip

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
Managing Member	Rivadavio Oliveira	
	5410 SW 134 Ave	
	Miramar, FL 33027	
Managing Member	Cenīra Oliveira	
	5410 SW 134 Ave	
	Miramar, FL 33027	
		9
A + + + + + + + + + + + + + + + + + + +		SECRETAL SECRETAR
(Use attachment if necessary)		SSEE.

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

Rivadavio Oliveira

ARTICLE IV- Manager(s) or Managing Member(s):

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2