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(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:	Registration Sectorial Division of Corp						
CLIP III	- Randoi	mRamblings I	I C				
SUBJE	SUBJECT: RandomRamblings LLC (Name of Limited Liability Company)						
The enc	losed Articles of O	rganization and fee(s) are	submitted fo	or filing	z .		
		dence concerning this mat			_		
_	James De	nestan					
_	Janio Do	- Inobian	(Name of Per	rson)			
	Random F	Ramblings					
-			(Firm/Comp	any)			
	111 NE 68	8th terrace					
_			(Address	;)			_
	Miami, Flo	orida 33138					
		(Ci	ty/State and Z	ip Code	e)		
For furt	her information co	ncerning this matter, pleas	e cail:				
James Denestan at 305 316-2448							
(Name of Person) (Area Code & Daytime Telephone Number)					thone Number)		
Enclose	ed is a check for t	the following amount:					
√ \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.0 Certifi (additio	ied Cop			\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Re Di CI 26	egistrati ivision lifton B 561 Exe	ourier Addition Section of Corpora Building ecutive Censee, FL 323	tions ter Ci	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Random Ramblings LLC (Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
111 NE 68th terrace Miami, Florida 33138	111 NE 68th terrace Miami, Florida 33138				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r James Denestan	tered Agent. You must designate an individual or another				
Name 111 NE 68th terra	SECRETARY O				
Miami, City, State, a	dress (P.O. Box NOT acceptable) FL 33138 and Zip				
liability company at the place designated in tregistered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S				

(CONTINUED) Page 1 of 2

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

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

	<u>Title:</u> "MGR" = Manager "MGRM" = Manag	in a Manuban	Name and Address:			
	MGRW - Wanag	ing Member	James Denestan			
			111 NE 68th terrace Miami, Fl 33138			
	MGRM		Mark Dazilme 102 NE 68th terrace Miami, Fl 33138			
	•					
	(Use attachment if	necessary)				
(If an	CLE V: Effective date of the classical effective date is listed to the date of	l, the date must be sp	e of filing: 01/02/2008 . (exific and cannot be more than five but	(OPTIO Isiness (,	•
	REQUIRED SIGN	NATURE:		SEC!	L 80	
	=	James Jon		RETAR VHASS	JAN-7	
	ó	n accordance with section of this document constitute that the facts stated herei	an authorized representative of a member. 10 608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury in are true.)	TARY OF STATE ASSEE FLORIDA	AM III: 35	
•	•		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)