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	Tallahassee, Florida 32309 (850) 681-6528	HUB BICKI D BY	S
SERVICES	CORPORATION RF CHGS, LLC	March 13,2008 N NAME (S) AND DOCUMENT MIMBER	K (S)
		To the	o O
Filing Evidence □ Plain/Confirmation □ Certified Copy		Type of Document  ☐ Certificate of Status  ☐ Certificate of Good Standing	16
		□ Articles Only	
Retrieval Reques  Photocopy  Certified Copy	est	<ul> <li>□ All Charter Documents to Include Articles &amp; Amendments</li> <li>□ Fictitious Name Certificate</li> <li>□ Other</li> </ul>	e

	NEW FILINGS
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

 AMENDMENTS
Amendment
Resignation of RA Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

	OTHER FILINGS
X	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION
Foreign
Limited Liability
Reinstatement
Trademark
Other

ARTICLES OF ORGANIZATION FOR FLO	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	DRIDA LIMITED LIABILITY COMPANY  by Company, "L.L.C.," or "LLC.")
RF CHGS, LLC (Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2200 Biscayne Boulevard Miami, Florida 33137	2200 Biscayne Boulevard Miami, Florida 33137
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another egistered agent are:
<u>Sharon Christenb</u>	ury, Esq.,
Miami, Florida 33	ress (P.O. Box <u>NOT</u> acceptable)
liability company at the place designated in t registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all informance 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:

IGR	RF Business Trust	<u> </u>
	2200 Biscayne Boulevard	
	Miami, Florida 33137	
	•	
Use attachment if necessary)		
	e date of filing: (C	

**REQUIRED SIGNATURE:** 

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.)

Sharon Christenbury, Esq., Authorized Representative
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)