(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:	
A. LUNT	
APR <b>28</b> 2008	

**EXAMINER** 

Office Use Only

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# **COVER LETTER**

TO: Registration S Division of Co			•		
SUBJECT. RCK	Beachwalk, LLC				
SOBJECT:	(Name of Limited L	iability Compar	ıy)		<del></del>
The enclosed Articles of	f Organization and fee(s) are subn	nitted for filing			
Please return all corresp	ondence concerning this matter to	the following:			
Andrew I	D. Kaiser	_			
	(Nan	ne of Person)		<del></del>	
The Kais	ser Law Firm, P.C.				
	(Fin	m/Company)			ZE ZE
12231 Manchester Road, 1st Floor					L AR
	(	(Address)			R 2
St. Louis	s, MO 63131				338 37 0 1 5
	(City/Sta	ate and Zip Code)	•		F ST
For further information	concerning this matter, please cal	<b>l</b> :			I: 57
Andrew D. K	Kaiser at	<u>314</u>	966-776 & Daytime Tele	36	
(Name	e of Person)	(Area Code	& Daytime Tele	phone Number)	
Enclosed is a check for	or the following amount:				
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	ру	\$160.00 Filin Certificate of Certified Co (additional cop	f Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center C cc, FL 32301		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company	is:		
RCK Beachwalk, LLC			
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:		Lating Co	
The mailing address and street address of the	principal office of the Limited L	lability Company i	s:
Principal Office Address:	Mailing Address:	·	
	2051 Gramercy Circle		
	Atlanta, GA 30341		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Robusiness entity with an active Florida registration.)			n
The name and the Florida street address of the	ne registered agent are:	2: AR SS	
CT Corporation	System	Y OF	M
Na	me	r-ico	O
1200 South Pine	e Island Road address (P.O. Box NOT acceptable)	1: 57 TATE ORIDA	
Plantation,	<sub>FL</sub> 33324	•	
City, Stat	te, 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

# ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGR Rohit M. Desal 2051 Gramercy Circle Atlanta, GA 30341 MGR Galina R. Desal 2051 Gramercy Circle Atlanta, GA 30341 MGR Galina R. Desal 2051 Gramercy Circle Atlanta, GA 30341

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

## Andrew D. Kaiser, Authorized Rep.

Typed or printed name of signee

Filing Fees:

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