## L080000013861

(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## COVER LETTER

	tion Section of Corporations	
SUBJECT, RIV	vershore Financial Se	rvices, LLC.
SUBJECT:		led Liability Company)
The enclosed Arti	icles of Organization and fee(s) are	submitted for filing.
Please return all c	orrespondence concerning this mat	tter to the following:
Richar	rd A. Neaton	
- 1101101		(Name of Person)
Rivers	shore Financial Servic	es, LLC.
<del></del>		(Firm/Company)
3071 F	Rivershore Lane	
		(Address)
Port C	charlotte, FL 33953	
	(Ci	ty/State and Zip Code)
For further inform	nation concerning this matter, pleas	e call:
Richard A.	Neaton	at ( 941 ) 587-7588
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a ch	eck for the following amount:	
\$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	:
Rivershore Financial Services, LL	C.
(Must end with the words "Limited Liab	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3071 Rivershore Lane	3071 Rivershore Lane
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registeries business entity with an active Florida registration.)  The name and the Florida street address of the Richard A. Neaton Name	stered Agent. You must designate an individual or another registered agent are:
3071 Rivershore La	ne
	dress (P.O. Box <u>NOT</u> acceptable)
Port Charlotte City, State,	FL 33953
Having been named as registered agent and to	accept service of process for the above stated limited this certificate, I hereby accept the appointment as

(CONTINUED) Page 1 of 2 FILED

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	r
MGRM	Richard A. Neaton
	3071 Rivershore Lane
	Port Charlotte, FL 33953
(Use attachment if necessary)	
CLE V: Effective date, if other th	an the date of filing: (OPTIONAL)
effective date is listed, the date n	nust be specific and cannot be more than five business days prio
90 days after the date of filing.)	
<u>REQUIRED</u> SIGNATURE:	
Tich	MA Machan member or an authorized representative of a member.
Ü	·
of this documer	with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)
Richard A	

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)

SECRETARY OF STATE

Typed or printed name of signee