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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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**EXAMINER** 

OR JUL 24 PH 3: 15

CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FE 222-1173	ENUE	rmerly CCRS)	:
FILING COVER ACCT. #FCA-14	SHEET		
CONTACT:	ASHLEY S	<u>MITH</u>	
DATE:	<u>07-24-2008</u>		
REF. #:	001260.8994	<u>13</u>	OB JIL 24 PH 3: 15
CORP. NAME:	RENE NIE	BLA, LLC	To To
( ) ARTICLES OF INCO	ORPORATION	( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME
( ) FOREIGN QUALIFI	CATION	( ) LIMITED PARTNERSHIP	(XX) LIMITED LIABILITY
( ) REINSTATEMENT ( ) CERTIFICATE OF ( ( ) OTHER:	CANCELLATION	( ) MERGER	( ) WITHDRAWAL
STATE FEES PI	REPAID W	ITH CHECK# 57811	FOR \$ <u>125.00</u>
AUTHORIZATI	ON FOR A	CCOUNT IF TO BE DEBITE	ED:
		COST LI	MIT: \$
PLEASE RETUI	RN:		
	V ()A	EDTIFICATE OF COOR STANDING	(VV) DI AIN STAMPED CODV

Examiner's Initials

( ) CERTIFICATE OF STATUS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Address:		
The mailing add	lress and street address of the	principal office of the L	Limited Liability Company is:
Principal Office	Address:	Mailing Ad	ddress:
scorpii	0	50	orpio
6167	CIRCLEAPT 218	6167 5	CIRCLEAPT 218
TAMPA, FL 336	614	TAMPA, F	L 33614
	_		
ARTICLE III -	- Registered Agent. Registe	red Office. & Registere	ed Agent's Signature:
	- Registered Agent, Registered Florida street address of the	_	ed Agent's Signature:
		_	ed Agent's Signature:
	e Florida street address of the RENE NIEBLA	_	
	e Florida street address of the	registered agent are:	
	RENE NIEBLA  Scoloio Name 6167 8 CIRCLE	e registered agent are: APT 218	
	RENE NIEBLA  Scoloio Name 6167 8 CIRCLE	registered agent are:	
	RENE NIEBLA  Scoloio Name 6167 8 CIRCLE	e registered agent are: APT 218	
	RENE NIEBLA  SCOLOIO Name 6167 & CIRCLE  Florida street address (  TAMPA, FL 33614	e registered agent are:  APT 218  P.O. Box NOT acceptab	
	RENE NIEBLA  SCOLO: Name 6167 8 CIRCLE  Florida street address (	e registered agent are:  APT 218  P.O. Box NOT acceptab	
	RENE NIEBLA  SCOLOIO Name 6167 & CIRCLE  Florida street address (  TAMPA, FL 33614	e registered agent are:  APT 218  P.O. Box NOT acceptab	
The name and th	RENE NIEBLA  SCOLO: Name 6167 & CIRCLE  Florida street address (  TAMPA, FL 33614  City, State,	APT 218 P.O. Box NOT acceptab	

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

## Title: "MGR" = Manager "MGRM" = Managing Member RENE NIEBLA MGRM G167 TAMPA, FL 33614 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested.

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.)

RENE NIEBLA

Typed or printed name of signee

## Filing Fees:

\$100.00 Filing Fee for Articles of Organization

**REQUIRED SIGNATURE:** 

\$25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)