

L09000002290

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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF REVENUE  
TALAHUESSA SECTION

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FILED

**S. HAWKES**

JAN 8 2009

**EXAMINER**

**Rebands 3131 N.E. 9<sup>th</sup> Terrace, LLC**

4823 Sugar Pine Dr.  
Boca Raton, FL 33487  
(561) 289-5371

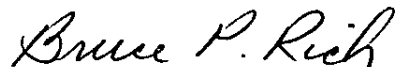
**December 28, 2008**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314  
(850) 245-6051

Florida Department of State:

Please find enclosed the forms, duly executed and signed, that are required to form a Florida Limited Liability Company. If you have any questions, please contact me, Bruce Rich, at 4823 Sugar Pine Dr., Boca Raton, FL 33487, or at (561) 289-5371. Thank you for your assistance.

Very Truly Yours,



Bruce Rich

Enclosure(s)

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Rebands 3131 N.E. 9th Terrace, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan + Bruce Rich  
(Name of Person)

Rebands 3131 N.E. 9th Terrace, LLC  
(Firm/Company)

4823 Sugar Pine Drive  
(Address)

Boca Raton, FL 33487  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce Rich at (561) 289-5371  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee  
☐ \$130.00 Filing Fee & Certificate of Status  
☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$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

### 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:

Rebands 3131 N.E. 9th Terrace, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

4823 Sugar Pine Dr.  
Boca Raton, FL.  
33487

**Mailing Address:**

4823 Sugar Pine Dr.  
Boca Raton, FL.  
33487

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Bruce Rich  
Name

4823 Sugar Pine Drive  
Florida street address (P.O. Box **NOT** acceptable)  
Boca Raton, FL 33487  
City, State, 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.*

Bruce P. Rich  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Bruce Rich  
4823 Sugar Pine Dr.  
Boca Raton, FL 33487

MGRM

Susan Rich  
4823 Sugar Pine Dr.  
Boca Raton, FL 33487

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**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:**

Bruce P. Rich

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.)

Bruce P. Rich

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)**