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Fla LLC

CWS

No P04-62498  
R.D.E., Inc.

W09-808

FILED  
09 JAN 26 AM 10:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: R D E "L.L.C."  
(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:

Harold R. Decker

(Name of Person)

R D E "L.L.C."

(Firm/Company)

998 Explorer Cove Suite 120

(Address)

Altamonte Springs, FL 32701

(City/State and Zip Code)

For further information concerning this matter, please call:

Harold R. Decker

407

774-0660

(Name of Person)

at (

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 8, 2009

HAROLD R. DECKER  
R D E "L.L.C."  
998 EXPLORER COVE, SUITE 120  
ALTAMONTE SPRINGS, FL 32701

SUBJECT: R D E "L.L.C."  
Ref. Number: W09000000808

We have received your document for R D E "L.L.C." and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P04000062498 R.D.E., INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux  
Document Specialist Supervisor

Letter Number: 209A00000644

## **Fycon Industries, L.L.C.**

998 Explorer Cove, Suite 120, Altamonte Springs, Fl. 32701

Phone (407) 834-2828 Fax (407) 774-0660

January 15, 2009

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

Ref: W09000000808

Att: Nanette Causseaux:

Pursuant to your letter Number 20900000644 of January 9, 2009 advising me that the name R.D.E., "L.L.C." is not available for use. Please find enclosed the corrected application using the name of Fycon Industries, L.L.C.

This name was used by me under document number 366644 until the corporation was dissolved in 1982.

Your cooperation in this matter is appreciated.

Yours truly,



Harold R. Decker

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

~~XXXXXXXXXXXX~~ RYCON INDUSTRIES, L.L.C.

(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:

998 Explorer Cove Suite 120

Altamonte Springs, FL 32701

### Mailing Address:

998 Explorer Cove Suite 120

Altamonte Springs, FL 32701

## 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:

Harold R. Decker

Name

998 Explorer Cove, Suite 130

Florida street address (P.O. Box **NOT** acceptable)

Altamonte Springs FL 32701

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.*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE, FLORIDA

**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:**

MGR

Harold R. Decker

513 Spring Valley Road  
Altamonte Springs, Fl 32714

MGR

Peggy D. Decker

513 Springs Valley Road  
Altamonte Springs, Fl 32714

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(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:**

  
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.)

Harold R. Decker  
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)

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