

609000008396

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000019074 3)))



H090000190743ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED
09 JAN 27 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2009 JAN 27 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

R.M.C. PLUS CONTRACTORS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

T. CLINE

JAN 28 2009

Help

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

1109000019074

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
OF
R.M.C. PLUS CONTRACTORS, LLC**

ARTICLE I - NAME:

The name of the Limited Liability Company Is:

R.M.C. PLUS CONTRACTORS, LLC

ARTICLE II - ADDRESS:

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

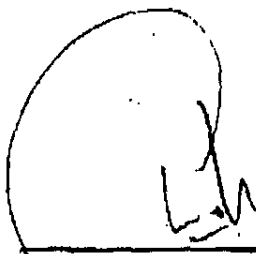
Principal Office Address:

8145 NW 7th street # 204
Miami, Fl 33126

Mailing Address:

8145 NW 7th street # 204
Miami, Fl 33126

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



**Danilo Duenas
8145 NW 7th street # 204
Miami, Fl 33126**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

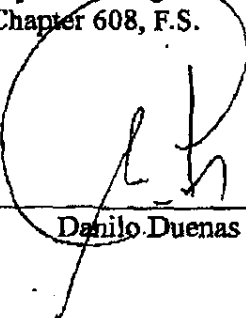
2009 JAN 27 AM 8:44

FILED

1109000019074

409000019074

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.

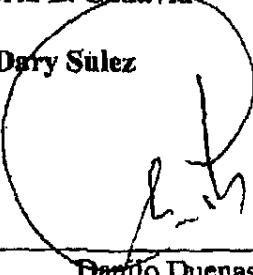


Danilo Duenas

ARTICLE IV - Management/Member(s):

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

<u>TITLE:</u>	<u>NAME AND ADDRESS:</u>
MGRM	Danilo Duenas
MGRM	Angel H. Castaneda
MGRM	Victoria E. Cadavid
MGRM	Luz Dary Sulez



Danilo Duenas

(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)

2009 JAN 27 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

409000019074