

W09000022161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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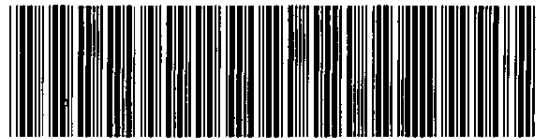
(Business Entity Name)

(Document Number)

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09 MAR - 5 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

MAR - 6 2009

EXAMINER

COVER LETTER

**To: Registration Section
Division of Corporations
P O Box 6327
Tallahassee FL 32314**

Subject: Robert Ritten Enterprises LLC

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

Please return all correspondence concerning this matter to the following:

**Robert G Ritten Jr
Robert Ritten Enterprises LLC
2715 S. 26th Street
Fort Pierce FL 34981**

For further information concerning this matter, please call:

Joyce E Kindel, Bookkeeper at (772) 569-1282

Enclosed is a check for the following amount: \$125.00 Filing Fee

**FILED
09 MAR -5 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I Name:

The name of the Limited Liability Company is:

Robert Ritten Enterprises LLC

ARTICLE II Address:

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

Principal Office Address

Mailing Address

2715 S. 26th Street, Fort Pierce, FL 34981 * 2715 S.26th Street, Fort Pierce, FL 34981

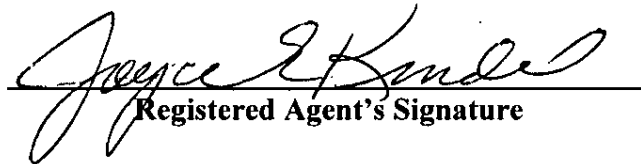
ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature

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

**Joyce E Kindel
1131 7th Avenue
Vero Beach FL 32960**

**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 068, F.S.**


Registered Agent's Signature

**FILED
09 MAR -5 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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

Title

Name & Address

MGRM

**Robert G Ritten, Jr.
2715 S. 26th Street
Fort Pierce FL 34981**

ARTICLE V - Effective date

The effective date is to be 10 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 the document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Robert G. Ritten Jr.
Typed or printed name of signee

**FILED
09 MAR -5 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**