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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUL 20 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RG 2009, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Robert Alan Graves

Name of Person

Robert Alan Graves, LLC

Firm/Company

P.O. Box 2826

Address

Orlando, Florida 32802-2826

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Alan Graves

Name of Person

at ( 407 )

592-8725

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee    ☐ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L09000064309  
FILED 8:00 AM  
July 02, 2009  
Sec. Of State  
ncausseaux

**Article I**

The name of the Limited Liability Company is:

R G 2009, LLC

**Article II**

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

5331 PASADEAN DRIVE  
ORLANDO, FL. US 32809

The mailing address of the Limited Liability Company is:

P.O. BOX 2826  
ORLANDO, FL. US 32802

**Article III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

**Article IV**

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

THOMAS P MOSS  
8913 CONROY WINDERMERE RD.  
ORLANDO, FL. 32835

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.

Registered Agent Signature: THOMAS P. MOSS, ESQ.

**Article V**

The name and address of managing members/managers are:

Title: MGRM  
ROBERT A GRAVES  
5331 PASADENA DRIVE  
ORLANDO, FL. 32809

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FILED 8:00 AM  
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**Article VI**

The effective date for this Limited Liability Company shall be:

07/02/2009

Signature of member or an authorized representative of a member

Signature: ROBERT A. GRAVES