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SECRETARY OF STATE

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## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CCT: Robecca Minkaff Holdings LLC Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Uri Y Mintoff Name of Person
	Uniform Mike Enterprises Inc.
	404 Edgewood Nienne Address
-	Clearwater, Florida 33705 City/State and Zip Code
_	Vebecca @ rebecca Nintedf. Com E-mail address: (to be used for future annual report notification)
For furt	ther information concerning this matter, please call:
	Uri Minkof at (727) 641-8351  Name of Person Area Code & Daytime Telephone Number
Enclos	red is a check for the following amount:
<b>]</b> \$125.	00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$\text{\$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}\$
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:	
Must end with the words "Limited Liability Co	Holdings LAC ompany, "L.UC." or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal street.	pal office of the Limited Liability Company is:
Principal Office Address:	ailing Address:
Cleanwatery Fl 33755	404 Edgewood Are Cleamater, Fl. 33755
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regis	tered agent are:
Uri Y. Um Wame	baff
Florida street address (P.O. Box	d Are,
Α .	
<u>Cleaus atta</u> FL City, State, and Zi	33755- P
Having been named as registered agent and to accelliability company at the place designated in this cregistered agent and agree to act in this capacity. It statutes relating to the proper and complete performaccept the obligations of my position as registered.	vertificate, I hereby accept the appointment as further agree to comply with the provisions of al mance of my duties, and I am familiar with and
Registered Agent's Signature (	REQUIRED)

(CONTINUED)

#### Page 1 of 2

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

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

"MGR" = Manag	ger	Name and Address:
"MGRM" = Mar <u>MGRM</u> MGRM	naging Member ——	Uri Minkaff / Uniform Mike Enterpris 404 Edgewood Are. Cleansoler Fl. 33755 Rebecca Minkaff 404 Edgewood Are. Cleansoler Fl. 33755
	_	
(Use attachment	if necessary)	-
ffective date is lis		e date of filing: 13 July 2009. (OPTIONAL) be specific and cannot be more than five business days prior
days after the da	GNATURE: /	
-		per or an authorized representative of a member.
-	Signature of a member (In accordance with se	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
-	Signature of a member of this document constitute that the facts stated here.	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
Filing Fees: \$125.00 Filing I of Reg	Signature of a member of this document constitute the facts stated here.	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)