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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

J. BRYAN

JAN - 4 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rule 13 Florida LLC
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:

Kevin O'Reilly
Name of Person

For Company

10308 Crepe Jasmine Ln
Address

Fort Myers, FL 33913
City/State and Zip Code

kevin@rule13.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kevin O'Reilly at 239 298-3766
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- [ ] $125.00 Filing Fee
- [X] $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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:
The name of the Limited Liability Company is:

Rule 13 Florida LLC
(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:	Mailing Address:
10308 Crepe Jasmine Ln	10308 Crepe Jasmine Ln
Ft. Myers, Fl. 33913	Ft. Myers, Fl. 33913

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.)

Effective Date 01/01/10

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

Kevin O'Reilly
Name

10308 Crepe Jasmine Ln
Florida street address (P.O. Box NOT acceptable)

Ft. Myers, Fl. 33913 Fl.
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..

Kevin O'Reilly
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

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TALLAHASSEE, FLORIDA

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGR	Kevin O'Reilly 10308 Crepe Jasmine Ln Ft. Myers, FL 33913

(Use attachment if necessary)

ARTICLE V: Effective date, if other from the date of filing: January 1, 2010. (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:

Kevin O'Reilly

Signature of a member or an authorized representative of a member.

(In accordance with section 817.155, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Kevin O'Reilly
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)