L10000022027

W. "

(Re	questor's Name)	
· (Ad	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(==	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900168438659

02/25/10--01016--007

**125.00

EFFECTIVE DATE 2/22/2010

10 FEB 25 AR 8: 26

CIUNUUU4887

B. KOHR MAR - 2 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		-,, .		IVE DAIL	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
SUBJ	ECT:	RACE	2 RICHES c	LOTHING	CO., LLC	10558
2020		ume of Limited L	iability Company			8
The e	nclosed Articles of Organization ar	nd fee(s) are sub	nitted for filing.			· ·
Please	e return all correspondence concern	ling this matter t	o the following:			·
		JERRO	LD PARHAM			
		Na	ne of Person			
		RACE 2	RICHES CLO	THING CO)., LLC	
		Fir	m/Company			
		4879 P	URITAN CIR	<u></u>		
			Address			
			A , FL 33617			
	**	City/St	ate and Zip Code			
		info@race	2richesonline.c	om		
	E-mail addres	s: (to be used for f	uture annual report no	tilication)		
For fi	urther information concerning this i	matter, please ca	H;	·		
	JERROLD PARHAM	1 a	.(813)		879875	
•	Name of Person		Area Code & D	aytime Telep	hone Number	
Enclo	osed is a check for the following	g amount:				
√ \$12:	5.00 Filing Fee \$\int\\$130.00 Fil Certificate of the control of th		\$155.00 Filing Fe Certified Copy (additional copy is ea		\$160.00 Filing Fe Certificate of Stat Certified Copy (additional copy is en	us &

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
ARTICLE I - Name: The name of the Limited Liability Con	npany is:	10 FE 8 25
RACE	2 RICHES CLOTHING CO., LLC	
(Must end with the words "Li	mited Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liabili	ity Company is:
Principal Office Address:	Mailing Address:	
4879 PURITAN CIR	P.O. BOX 16069	
TAMPA , FL 33617	TEMPLE TERRACE, FL	
	33689-6069	

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.)

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

JERROLD PARHAM
Name
4879 PURITAN CIR
Florida street address (P.O. Box NOT acceptable)
TAMPA , FL 33617 $_{ m FL}$
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..

Registered Agent's Signature (REQUIRED)

Page 1 of 2 (CONTINUED)

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JERROLD PARHAM
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
	date of filing: 2 /22/10 . (OPTIONAL) e specific and cannot ce more than five business days
REQUIRED SIGNATURE:	r or an authorized representative of a member.
Signature of a membe.	
(In accordance with sec	ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)