LIUCCO82055

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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S. HAWKES

AUG 5 - 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co			·
	DIVIDION OF CO	or por actions		
SUBJ	ECT: RAR RE	eal Estate Repairs, LLC		
		Name of Limit	ed Liability Company	
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	oondence concerning this mat	ter to the following:	
	Roger Reade	r		
			Name of Person	
	RAR Real Es	tate Repairs, LLC		
			Firm/Company	
	1935 SW 101	St Avenue		
			Address	
	Davie, Florida	a 33324	•	
		Cit	y/State and Zip Code	
	rogerreader@	aol.com		_,
		E-mail address: (to be used t	or future annual report notification)	
For fur	ther information	concerning this matter, please	e call:	
Roge	r Reader		at (954)610-1169	
	Name	of Person	Area Code & Daytime Telep	phone Number
Enclos	sed is a check fo	or the following amount:		
⊒\$125	.00 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

RAR Real Estate Repairs, 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:	
1935 SW 101ST Avenue	1935 SW 101ST Avenue	
Davie, Florida 33324	Davie, Florida 33324	

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:

Roger Ro	eader
	Name
1935 SV	V 101ST Avenue
	Florida street address (P.O. Box NOT acceptable
Davie	FL 33324
	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)

(CONTINUED)
Page 1 of 2

The name and address of each Manag	ger or Managing Member is as follows:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Roger Reader	
THO THE PART OF TH	Roger Reader 1935 SW 101ST Avenue	
	Davis, Florida 33324	—— *
•		 •
		•
——————————————————————————————————————		
		4
		
		
	<u> </u>	
		
(Use attachment if necessary) LE V: Effective date, if other than the	July 28, 2010 date of filing: June 30, 2010	(OPTIONA
fective date is listed, the date must be days after the date of filing.)	e specific and cannot be more than five b	ousiness day
REQUIRED SIGNATURE:	r or an authorized representative of a member	.
REQUIRED SIGNATURE: Signature of a member (In accordance with sec	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)