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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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T. HAMPTON SEP 2 7 2010

**EXAMINER** 

#### **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations
SUBJECT: Roni's Go and Do Shuttle Bus Tours
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:
Veronica Engels
Name of Person
Roni's Go and Do Shuttle Bus Tours
Firm/Company
114 Reva Street O King Transportation
Daytona Beach, FL 32114
City/State and Zip Code
roni@roni'sgoanddo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
To further information concerning this matter, prease ear.
Veronica (Roni) Engels at ( 386 ) 290-3998
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations

Dept of State

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314



RECEIVED

10 SEP 24 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

**Division of Corporations** 

September 17, 2010

VERONICA ENGELS % KINGS TRANSPORATION 114 REVA ST DAYTONA BEACH, FL 32114

SUBJECT: RONI'S GO AND DO SHUTTLE BUS TOURS, LLC

Ref. Number: W10000042061

We have received your document for RONI'S GO AND DO SHUTTLE BUS TOURS, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 010A00022197



September 7, 2010

VERONICA ENGELS % KINGS TRANSPORATION 114 REVA ST DAYTONA BEACH, FL 32114

SUBJECT: RONI'S GO AND DO SHUTTLE BUS TOURS, LLC

Ref. Number: W10000042061

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If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 410A00021282

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

#### Roni's Go and Do Shuttle Bus Tours, 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:114 Reva Street1750 S. Palmetto Ave. Unit #35Daytona BeachSouth Daytona,FI, 32114FL 32119

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:

Veronica Engels

Name

Florida street address (P.O. Box NOT acceptable

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

DIVISION OF CORPORATION

### ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_. (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:

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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)