# L110000014025

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Enuty Name)
(Document Number)
,
Certified Copies Certificates of Status
Consideration to Filips Office
Special Instructions to Filing Officer:
Δ
A. LUNT
FEB <b>- 2</b> 2010
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DEPARTMENT OF CORPORATIONS

BY USE OF CORPORATIONS

SECRETARY OF STALLAHASSEE, FLO

1 FEB = 2 PM 3-1

# **COVER LETTER**

•	on Section f Corporations			
SUBJECT: R&	M international bar, L	.LC		
SUBJECT.		Liability Company		
The enclosed Articl	es of Organization and fee(s) are su	bmitted for filing.		
Please return all con	respondence concerning this matter	to the following:		
Ricard	o Mangual		TAI ST	
		ame of Person	FEB -2 CRETAR LAHAS	
<del></del>	F	irm/Company	SEE. 3	٦
2104 n	nichigan ave		75 Q (	
		Address	<b>용</b> 취 <b>-</b>	
Kissimm	ee, Florida 34744			
ricardom	-	State and Zip Code		
<u>ncardom</u>	angual7@gmail.com  E-mail address: (to be used for	future annual report notification)		
For further informa	tion concerning this matter, please c	eall:		
Ricardo Mang	gual	at ( ) 254)394-312	0	
N	ame of Person	Area Code & Daytime Telepho	ne Number	
Enclosed is a chec	ck for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	1160.00 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 Circ Tallahassee, FL 32301	le	•

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	ame: Limited Liability Company is:
R&M inter	national bar, 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:	<b>Mailing Address:</b>	SE TAL
2104 michigan ave		
Kissimmee, Florida 34744	<u>SAME</u>	B -2
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)  The name and the Florida street address of the	Registered Agent. You must designate an i	nt's Signature:
Ricardo Mangual		
Na	ame	
2104 michigan	ave	
Florida street	t address (P.O. Box NOT acceptable)	
Kissimmee	<sub>FL</sub> 34744	
City	y, 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)

## 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		70
"MGRM" = Managing Member		
MGRM	Ricardo Mangual	≥器 🗃
	2104 michigan ave	> = = = = = = = = = = = = = = = = = = =
	Kissimmee, Florida 34744	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
		mg 3
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		<b>&gt;</b>
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	-	<del></del>
(Use attachment if necessary)		
CLE V: Effective date, if other than the	date of filing:	(OPTIONAL
	e specific and cannot be more than five	
enective date is fisted, the date must d		
of days after the date of filing.)		
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0 days after the date of filing.)		
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0 days after the date of filing.)		
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0 days after the date of filing.)  REQUIRED SIGNATURE:	er or an authorized representative of a mem	ber.
0 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member	•	
O days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member	er or an authorized representative of a member 3.408(3), Florida Statutes, the execution of this er the penalties of perjury that the facts stated he mation submitted in a document to the Departm	document erein are true.

Ricardo Mangual

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)