

U110000068876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

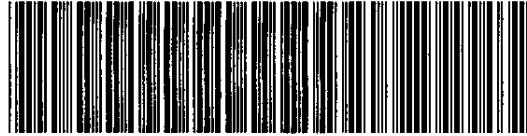
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

U11000027418

Office Use Only



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05/17/11--01013--015 \*\*125.00

FILED  
11 JUN 10 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 13 2011

EXAMINER

*Robin B. Neandross  
19 Bayview Road  
Tequesta, FL 33469*

June 9, 2011

Florida Department of State  
Division of Corporations  
Attn: Deborah Bruce  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Reel Deal Venture Capital, LLC  
Ref. Number: W11000027418

FILED  
11 JUN 10 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dear Ms. Bruce:

In connection with the above referenced matter, I have enclosed herewith our corrected filing for Articles of Organization for Reel Deal Venture Capital, LLC. We have corrected the Registered Agent information to reflect an individual as per your requirements. You are still holding our filing fee of \$125.00 and I would ask that you file these articles at your earliest possible convenience.

Once these articles have been filed, please return them to my attention at the address listed above. Thank you for your cooperation in this matter.

Very truly yours,

  
Robin B. Neandross

RBN/tar  
Enc.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 18, 2011

ROBIN B. NEANDROSS TRUST  
19 BAYVIEW ROAD  
TEQUESTA, FL 33469

SUBJECT: REEL DEAL VENTURE CAPITAL, LLC  
Ref. Number: W11000027418

FILED  
11 JUN 10 PM 2:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for REEL DEAL VENTURE CAPITAL, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 011A00012317

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Reel Deal Venture Capital, 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:

Robin B Neandross Trust

Name of Person

Reel Deal Venture Capital, LLC

Firm/Company

19 Bayview Road

Address

Tequesta, FL 33469

City/State and Zip Code

neandrossest@att.net

E-mail address: (to be used for future annual report notification)

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JUN 10 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Robin B Neandross

Name of Person

at ( 561 ) 743-4732

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$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

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Reel Deal Venture Capital, 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:

19 Bayview Road  
Tequesta, FL 33469

#### Mailing Address:

19 Bayview Road  
Tequesta, FL 33469

### 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:

Robin B Neandross

Name

19 Bayview Road

Florida street address (P.O. Box **NOT** acceptable)

Tequesta FL 33469

City, State, and Zip

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11 JUN 10 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

Robin B. Neandross

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:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Robin B Neandross Trust

19 Bayview Road

Tequesta, FL 33469

MGRM

Mike Francescani

1434 NE 24th Street

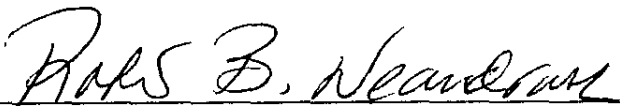
Jensen Beach, FL 34957

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Robin B Neandross

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)

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14 JUN 10 PM 2:58  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA