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COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Rift Clothing, LLC.	
	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Lawrence Smith	
	Name of Person
Rift Clothing, LLC.	
	Firm/Company
2520 SW 4th Street	
	Address
Boynton Beach, FL. 33435	
Cit	y/State and Zip Code
lawrencesmithdesign@gmail.co	ior future annual report notification)
For further information concerning this matter, please	
Lawrence Smith	at (561) 577-4328
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 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:			
Rift Clothing, LLC.			
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liabilit	y Company i	s:
Principal Office Address:	Mailing Address:		
2520 SW 4th Street Boynton Beach, FL. 33435	2520 SW 4th Street Boynton Beach, FL. 33435		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)			
The name and the Florida street address of the re	egistered agent are:	ESE =	
Lawrence Smith		→ R =	П
Name		ASS.	=
2520 SW 4th Street		JUL 15 AM 10: 31 RETARY OF STATE AHASSEE, FLORIDA	TLED
Florida street address (P.O. Box NOT acceptable)		STI OF STI	
Boynton Beach	_{FL} 33435	8E 31	
City, Sta	te, 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 "MGRM" = Managing Member MGR Lawrence Smith 2520 SW 4th Street Boynton Beach, FL. 33435 MGR Nadeem Awad 5522 Boynton Gardens Drive Boynton Beach, FL. 33437 (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 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.) Lawrence Smith 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)