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Effective Date

03/06/12--01016--024 \*\*130.00

Effective Date 3-1-12

2012 MAR -6 AM 8:52

J. SAULSBERRY EXAMINER

MAR\_8 2012

## - COVER LETTER

	tion Section of Corporations		
<sub>SURJECT:</sub> Re	cord Results LLC		
SCHOLET.		d Liability Company	
The enclosed Arti	cles of Organization and fee(s) are so	ubmitted for filing.	
Please return all co	orrespondence concerning this matte	r to the following:	
Steph	anie A. Harris and/o	r Joseph K. Batista	
Recor	d Results LLC	value of tersoir	ź
		Firm/Company	•
670 B	imini RD		<b>20</b>
<del> </del>		Address	27 M
Statellit	e Beach, FL 32937		HAR AHAS
	•	State and Zip Code	SEC. A
Record	ResultsLLC@gmail.com	- Suture annual report notification)	
For further inform	ation concerning this matter, please	r future annual report notification)	8: 52 TATE ORIDA
Joseph Batis	sta	at (718 ) 930-1698 or 718-	930-8148
	Name of Person	Area Code & Daytime Telephone Nu	<del></del>
Enclosed is a che	eck for the following amount:		
\$125.00 Filing Fe	s \$130.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	00 Filing Fee, ficate of Status & fied Copy onal 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:** ş : -The name of the Limited Liability Company is: Record Results 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: 670 Bimini Rd 65-58 Parsons Blvd Statellite Beach, FL 32937 Fresh Meadows, NY 11365 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: Stephanie A. Harris Name

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.

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

(CONTINUED)

670 Bimini RD

Satellite Beach

Page 1 of 2

Title:		Name and Address:	
"MGR" = Manager	•	•	10 - 10 - 11 - 12 - 12 - 12 - 12 - 12 -
"MGRM" = Manag	ging Member	**************************************	- ** - ** *** *** *** ***
Vice President		Joseph K. Batista	
	-	65-58 Parsons Blvd, 3A	
		Fresh Meadows, NY 11365	
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