

9/04/12 3:58:27 PM RECEIVED BY PRO FAX PAGE 1 OF 3

**L12000113293**

9/4/12

Division of Corporations

## Florida Department of State

## Division of Corporations

## Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax and it number (shown below) on the top and bottom of all pages of the document.

(((H12000218657 3)))



H120002186573ABC%

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : BUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address:

LURK722@yahoo.com

## FLORIDA LIMITED LIABILITY CO.

## R.T.A Enterprises LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 0        |
| Page Count            | 02       |
| Estimated Charge      | \$130.00 |

FILED  
12 SEP -4 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
12 SEP -4 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

SEP -5 2012

EXAMINER

09/04/2012 3:58:28 PM -0400 POWERED BY ORCAFAK

PAGE 2 OF 3

**H12000218657**

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

**ARTICLE I - Name**

The name of the Limited Liability Company is: **R.T.A. Enterprises LLC**

## ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

**Media Address:**

7641 Melvin Road

7641 Melvin Road

Jacksonville, FL 32210

Jacksonville, FL 32210

**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature**

The name and Florida street address of the registered agent are:

Reginald T. Goodman

Name \_\_\_\_\_

7641 Melvin Road

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Jacksonville, FL 32210

(City / State / 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 - Reginald T. Goodman

FILED  
12 SEP -4 AM 8:06  
SECOND JURY OF STATE  
TALLAHASSEE, FLORIDA

09/04/2012 3:58:28 PM -0400 POWERED BY ORCAFAX

PAGE 3 OF 3

H12000218657

**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:**

MGRM

Angela M. Goodman - 2460 Spring Vale Road, Jacksonville, FL 32246

MGRM

Timothy S. Goodman - 2460 Spring Vale Road, Jacksonville, FL 32246

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



Signature of a member or 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.)

Angela M. Goodman

Typed or printed name of signer

FILED  
12 SEP -4 AM 8:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA