

L12000126145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

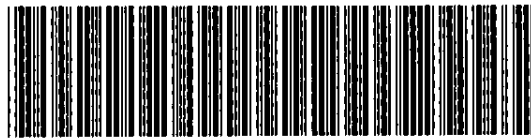
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DIVISION OF CORPORATIONS
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

J. SAULSBERRY
EXAMINER

OCT 3 2012

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: KATIE WONSCH

DATE: 10/02/2012

REF. #: 000409.173758

CORP. NAME: RF AUTOMOTIVE GROUP LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 101372 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
RF AUTOMOTIVE GROUP LLC**

In compliance with Chapter 608 of the Florida Limited
Liability Company Act

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I: - Name

The name of the Limited Liability Company is:

RF AUTOMOTIVE GROUP LLC

ARTICLE II: - Address

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

567 SW 7th Street, No. 4
Miami, FL 33130

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

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

**NRAI Services, Inc.
515 East Park Avenue
Tallahassee, FL 32301**

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.

NRAI Services, Inc.

By: Katie Wonsch
Name: Katie Wonsch
Title: Assistant Secretary

ARTICLE IV: - Management

☒ The Limited Liability Company is to be managed by one or more Managers and is, therefore, a manager - managed company.

ARTICLE V: - Managers

The name and address of the initial Manager is as follows:

MGR Lissette Paneque
 567 SW 7th Street, No. 4
 Miami, FL 33130

MGR Jose Sanchez
 3500 NW 54th Street
 Miami, Florida 33142

ARTICLE VI: - Officers

The name and address of the initial Officers, who will be subject to the direction of the Managers is as follows:

President, Secretary and Treasurer: Jose Sanchez, 3500, NW 54th Street, Miami, FL 33142.



Lissette Paneque, Authorized Signer

(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.)

Lissette Paneque
Typed or printed name of signee

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