# 13000044953

(Requestor's Name)		
(Ad	dress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phone	→ #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
,		

Office Use Only



500245805375

03/25/13--01009--008 \*\*160.00

2013 HAR 25 PH 2:57
SECRETARY OF STATE

MAR 26 2013 J. BRYAW

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: R+T Properties of Pauldin County, Name of Limited Liability Company	uc
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Robert Long Name of Person	
R+J Properties of Paulding County	LLC
225 Twin Creeks Path Address	
City/State and Zip Code	
C + 4315 @ qmail. 10m 器 =	
The state of the s	3 河
Name of Person  at (770) 974. 2010 97	PH 2: 57
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee U\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	us &
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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	::
R+ Treputi (Must end with the words "Limited Liab	es of Pauldin County, 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:
Robert Long	4704 Cedanivest Rd. amonth, 6A 3010 1
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
Philip Nam	registered agent are:  Tyler  e  Tyler
	ddress (P.O. Box NOT acceptable)
Marianna City, S	FL 32446 State, and Zip
Having been named as registered agent and to	accept service of process for the above stated limited

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..

(RED)

(CONTINUED)

Page 1 of 2

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Robert Long, MGR	4706 Cedaurest Road Acmorth, GA 30101
Jewel LongiMERM	4706 Cidourest Road Alworth, GA 30101
	SELECTION OF THE PARTY OF THE P
(Use attachment if necessary)	PH 2: 57
	e of filing: $\frac{Opr://l, 2013}{l}$ . (OPTIONAL) specific and cannot be more than five business days

## **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.)

Robert P Long
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)