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COVER LETTER

TO: Registration Section **Division of Corporations SUBJECT: Written Rastafari Archives Project LLC.** Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Douglas Smith Rootz Foundation Inc. 4492 Hallandale Beach Boulevard Address Pembroke Park, FI 33023 City/State and Zip Code rootzfoundation@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (754) 264-2205 Douglas Smith Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$125.00 Filing Fee _\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section **Division of Corporations Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:



Written Rastafari Archives Project 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:

4492 Hallandale Beach Boulevard Pembroke Park, Fl 33023

4492 Hallandale Beach Boulevard Pembroke Park, FI 33023

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:

InCorp Services, Inc.

17888 67th Court North

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

Loxahatchee

33470

City, State, and Zip

) Services, Inc.

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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Douglas Smith
	1500 SW 63rd Terrace
	North Lauderdale, Fl 33068
MGRM	I. Jabulani Tafari
	9705 Lily Bank Court
	Riviera Beach, Fl 33023
	
(Use attachment if necessary)	
	the date of filing: September 11, 2013. (OPTIONAL)
	st be specific and cannot be more than five business days prior
to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	
1 Pronte	2 Sant -
Jeruly o	a. Jul.
Signature of a me	ember or an authorized representative of a member.
(In accordance with section	n 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. nformation submitted in a document to the Department of State
constitutes a third degree f	Pelony as provided for in s.817.155, F.S.)
	Douglas Smith
	Typed or printed name of signee