# 1/3000/33223

-		
(Requ	uestor's Name)	
(Addı	ress)	
(Addı	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doct	ument Number)	s
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
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Office Use Only



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09/11/13--01020--014 \*\*125.00

## **COVER LETTER**

TO: **Registration Section Division of Corporations** Rise N' Shine FC LLC SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all corresp	ondence concerning this matte	er to the following:	
Edward	W Zerrien Jr		
		Name of Person	
Rise N'	Shine FC LLC		
***************************************		Firm/Company	
4785 Pa	apaya St		
		Address	
Cocoa	Florida, 32926	6	
<del></del>	Cit	y/State and Zip Code	
maezerrie	n@bellsouth.net		
	E-mail address: (to be used f	or future annual report notification)	
For further information	concerning this matter, please	call:	
Melinda R	Zerrien	_at(321)431-1	857
Name	of Person	Area Code & Daytime Telep	
Enclosed is a check for	or the following amount:		
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	

**Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



September 12, 2013

EDWARD W ZERRIEN JR 4785 PAPAYA ST COCOA, FL 32926

SUBJECT: RISE N SHINE FC LLC Ref. Number: W13000050506

We have received your document for RISE N SHINE FC LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete page 2 of the articles of organization.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 013A00021491

Tim Burch Regulatory Specialist II

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - I	Name:		•		
The name of the	e Limited Liability Com	ipany is:			
		. •			
Rise N' Shine FC L	<u>LC</u>	•			
	(Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")	,		
ARTICLE II -	Addross				
		of the principal office of the Limited	Liability	. Con	nany is
					.p <b></b> , 10
Principal Offic	e Address:	Mailing Address:			
4785 Papaya St		4785 Papaya St			
Cocoa Florida		Cocoa Florida	<del></del>	_	
32926		32926			
				_	
The name and t	Edward W Zerrien Jr	s of the registered agent are:	SECRE	13 SE	
		Name	AS:	-0	<u> </u>
	4785 Papaya St		SER	9	m
		street address (P.O. Box NOT acceptable)	TI'S	35	Ö
	Cocoa		OŘÍ	<del></del>	
		City, State, and Zip	Am	9	
77 . 1	1				* ** *.
liability com	pany at the place design	nt and to accept service of process for the mated in this certificate, I hereby accept his capacity. I further agree to comply	t the app	ointn	nent as
		is capacity. Tjuriner agree to comply I complete performance of my duties, a			
		ion as registered agent as provided for			
•					,
	Court	Simple (DECHARD)			
	Kegistered Agei	nt's Signature (REQUIRED)			

(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:

MGRM		Edward W Zerrien Jr	·
		4785 Papaya St	
		Cocoa Florida, 32926	
MGRM		Christopher M Colon	
		420 Firestone St	
•		N.E Palm Bay Florida, 32907	
	•	·	E Silver
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(Use attachment	if necessary)	•	
(000 0000000000000000000000000000000000	,		
LE V: Effective	date, if other than th	ne date of filing: 9/16/2013	(OPTIONAI
		st be specific and cannot be more tha	n five business
	the date of filing.)		
	-		

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.)

Edward W Zerrien Jr

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)