

10/7/13

Division of Corporations

Florida Department of State

Division of Corporations  
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(((H13000222681 3)))



H130002226813ABCZ

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To:

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

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Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (800) 293-4075

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

Email Address: sedheer30@aol.com

**FLORIDA LIMITED LIABILITY CO.  
LRLB L.L.C.**

Certificate of Status	1
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13 OCT -7 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER  
OCT 8 2013

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

H13000222681

ARTICLE I - Name

The name of the Limited Liability Company is: **LRLB, L.L.C.**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

7&9 Rosa Jones Boulevard

7&9 Rosa Jones Boulevard

Cocoa, FL 32922

Cocoa, FL 32922

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

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

Terrance Bohanna

Name

7&9 Rosa Jones Boulevard

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

Cocoa, FL 32922

(City / State / Zip)

2013 OCT -7 AM 9:27  
STATE  
TALLAHASSEE FL 32304

*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.*

Terrance Bohanna

Registered Agent's Signature - Terrance Bohanna

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

H13000222681

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

<u>MGRM</u>	<u>Kristy Hampton - 984 Harbor Pines Drive, Merritt Island, FL 32952</u>
<u>MGRM</u>	<u>Debra Parker - 2111 Clairemont Drive, Cocoa, FL 32922</u>
<u>MGRM</u>	<u>Terrance Bohanna - 2111 Clairemont Drive, Cocoa, FL 32922</u>
<u>MGRM</u>	<u>Rickey Baughman - 2111 Clairemont Drive, Cocoa, FL 32922</u>

(Use attachment if necessary)

REQUIRED SIGNATURE:

Terrance Bohanna

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.)

Terrance Bohanna

Typed or printed name of signee

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TALLAHASSEE, FL 32304

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