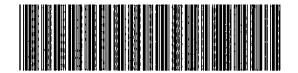
# 13000155387

Office Use Only



100252864841

11/04/13--01013--020 \*\*155.00

2013 NOV -4 AM 51-19 64 : G NA 1- AON 5162

HOV - 5 2013

## **COVER LETTER**

TO: Registration Section **Division of Corporations** R & T POWER HOUSE PROPERTIES 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: Julia Greenberg-Aguilar
Name of Person MyUSAcorporation.com

Firm/Company 40 Exchange Place STE 1301 New York, NY 10005
City/State and Zip Code williams.richard032@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Julia Greenberg-Aguilar Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$155.00 Filing Fee & \$125.00 Filing Fee \[ \_\$130.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

Ť

The name of the Limited Liability Company is:

# R & T POWER HOUSE PROPERTIES 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:   |                             |
|---|--|-----------------------------|
| 2600 Georgia Ave.   | 2600 Georgia Ave.  | •                           |
| Ste.1408  | Ste.1408   | <del></del>                 |
| Sanford, FL 32771   | Sanford, FL 32771  |                             |
| (The Limited Liability Company cannot s<br>business entity with an active Florida reg | gent, Registered Office, & Registered Agent<br>erve as its own Registered Agent. You must designate an ind<br>gistration.)  t address of the registered agent are: | lividual or another         |
|   | Villiams Jr  | NOV -4<br>ARETARY<br>AHASSE |
|   | Name   | 1                           |
| 2600 G  | eorgia Ave. Ste.1408   |                             |
| <del></del>   | Florida street address (P.O. Box NOT acceptable)   | STATE LORIDA                |
| Sanford   | <sub>FL</sub> 32771  | B 19                        |
|   | City, State, and Zip   |                             |
|   |  |                             |

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

| Title:   |  | Name and Address:  |            |
|--|--|--|------------|
| "MGR" =  | = Manager  | <del></del>  |            |
| "MGRM  | " = Managing Member  | r  |            |
| MGRM   |  | Richard Williams Jr  |            |
|  | <del></del>  | 2600 Georgia Ave. Ste.1408   |            |
|  |  | Sanford, FL 32771  |            |
| MGRM   |  | Teal Jolivette   |            |
|  | <del> </del>   | 300 Mcdonald St. No. V-11  |            |
|  |  | Lafayette, LA 70506  |            |
|  |  | ,  |            |
|  |  |  |            |
|  |  |  |            |
|  |  |  |            |
|  |  |  |            |
|  | <del></del>  |  |            |
|  |  |  |            |
| ,  | chment if necessary)  Rective date, if other tha   | an the date of filing: (OPTIONAL   | <b>.</b> ) |
| CLE V: Ei  | ffective date, if other that   | an the date of filing: (OPTIONAL nust be specific and cannot be more than five business days   |            |
| CLE V: Ei<br>effective da<br>0 days afte                   | ffective date, if other thate is listed, the date m  |  |            |
| CLE V: Ei<br>effective da<br>0 days afte                   | ffective date, if other that the is listed, the date mer the date of filing.)  RED SIGNATURE:  | J. J   | prio       |
| CLE V: Ei<br>effective da<br>0 days afte                   | ffective date, if other that the is listed, the date mer the date of filing.)  RED SIGNATURE:  Signature of an (In accordance with section constitutes an affirmation I am aware that any false  | member or an authorized representative of a member.  ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. The information submitted in a document to the Department of State to felony as provided for in s.817.155, F.S.)  | prio       |
| CLE V: Ei<br>effective da<br>00 days afte                  | ffective date, if other that the is listed, the date mer the date of filing.)  EED SIGNATURE:  Signature of a mer that accordance with section constitutes an affirmation I am aware that any false constitutes a third degree         | member or an authorized representative of a member.  ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true.  e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.)  berg-Aguilar (Authorized Representative)  | prio       |
| CLE V: Ei<br>effective da<br>90 days afte                  | ffective date, if other that the is listed, the date mer the date of filing.)  EED SIGNATURE:  Signature of a mer that accordance with section constitutes an affirmation I am aware that any false constitutes a third degree         | member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. The information submitted in a document to the Department of State in formation submitted in a document to the Department of State in formation submitted in a fact stated herein are true. Typed or printed name of signee  | prio       |
| CLE V: Ei<br>effective da<br>90 days afte<br><u>REQUIR</u> | Frective date, if other that the is listed, the date mer the date of filing.)  RED SIGNATURE:  Signature of an (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree Julia Green | member or an authorized representative of a member.  ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. The information submitted in a document to the Department of State in formation submitted in a document to the Department of State in formation submitted in a s | prio       |
| CLE V: Ei<br>effective da<br>00 days afte<br><u>REQUIR</u> | ffective date, if other that the is listed, the date mer the date of filing.)  EED SIGNATURE:  Signature of a mer that accordance with section constitutes an affirmation I am aware that any false constitutes a third degree         | member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. The information submitted in a document to the Department of State in formation submitted in a document to the Department of State in formation submitted in a fact stated herein are true. Typed or printed name of signee  | prio       |