

# L 13000164253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

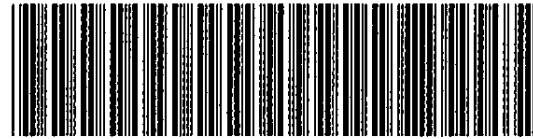
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/21/13--01009--027 \*\*160.00

EFFECTIVE DATE  
1-1-2014

**FILED**  
**Nov 21, 2013 08:00 AM**  
**Secretary of State**

K. SALY  
EXAMINER  
NOV 22 2013

(850) 245-6051.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RUCKS' GUNS + REPAIRS L.L.C.  
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:

DAVIS BRENT RUCKS  
Name of Person

RUCKS' GUNS + REPAIRS L.L.C.  
Firm/Company

405 N.E. 160th St.  
Address

OKEECHOBEE, FLORIDA 34972  
City/State and Zip Code

~~HOME~~ rucks@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRENT RUCKS at (863) 763-5110  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for 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  
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

FILED

Nov 21, 2013 08:00 AM

Secretary of State

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE

RUCKS' GUNS + REPAIRS L.L.C.

(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:

405 N.E. 160th Street  
OKEECHOBEE COUNTY  
FLORIDA 34972

Mailing Address:

POST OFFICE BOX 339  
OKEECHOBEE, FLA.  
34973

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:

DAVIS BRENT RUCKS

Name

405 N.E. 160 st

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

OKEECHOBEE (FL) 34972

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..*

Davis Brent Rucks

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

DAVIS BRENT RUCKS  
405 N.E. 160th St.  
OKEECHOBEE, FLA. 34972

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: JAN. 1st, 2014. (OPTIONAL)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

DAVIS BRENT RUCKS  
 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)