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(Re	questor's Name)	<u>. </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #f)
	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
:		

Office Use Only



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7014 JAN 21 PH 12: 42

JAN 23 MIL

EFFECTIVE DATE DIPOLITY

COVER LETTER

TO:

Registration Section

Divi	ision of Corporations					
SUBJECT:	RBK Land, LLC					
	Name of	Limited Liabil	ity Company	-		
The enclosed	Articles of Organization and fee(s	s) are submitted	for filing.			
Please return	all correspondence concerning this	s matter to the	following:			
	W F Vassar Jr					
_		Name of	Person,			
	RBK Land, LLC					
_		Firm/Co	ompany			
	PO Box 252					
-		Addı	ess			
	High Springs, FL	32655				
		City/State ar	d Zip Code	2	2014	
_	buck@bv-ltd.com	s: (to be used f	or future annual report notification)	3.5	5	434
For further in	nformation concerning this matter,		or rando annual report notification)	3SSY ARM	2014 JAN 21	
W	/ F Vassar Jr	352	262-4010	EFLO:	PH 12: 43	n
	Name of Person	Area Code	Daytime Telephone Number	AGN STA	: 43	ĥt.,,
Enclosed is a	check for the following amount:					
\$125.00 Filin	Certificate of Status	Certif	00 Filing Fee & \$160.00 F Ged Copy Certificate (additional c	e of Status & Copy		
	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

RBK Land, LLC	
(Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")
TICLE II - Address:	
	ipal office of the Limited Liability Company is: Mailing Address:

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

Dean G. Poole		
Nan	ne	·
2531 NW 41 Street	Bldg D	
Florida street address (P.O. B	ox <u>NOT</u> acc	eptable)
Gainesville	FL	32606
City		Zip

2014 JAN 21 PH 12: 43

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

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

EFFECTIVE DATE 01/2014

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	W.E. Vaccar, Ir., ac Truston
AMDIX	W F Vassar Jr, as Trustee PO Box 252
	High Springs, FL 32655
•	
	e date of filing: (OPTIONAL)
LE V: Effective date, if other than the	e date of filing:01/20/2014 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days
LE V: Effective date, if other than the fective date is listed, the date must of filing.)	be specific and cannot be more than five business days prior to or 90 days
LE V: Effective date, if other than the fective date is listed, the date must of filing.) LE VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days
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