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B. SOSTICK
FEB 27 2014

EXAMINER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: RK Quintana, 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:
Kelly Quintana
Name of Person
Firm/Company
3826 S.W. 1st Ave
Gainesville FL 321007 City/State and Zip Code Kelly Kirk 72 @ yahoo. com E-mail address: (to be used for future annual report notification)
City/State and Zip Code
Kelly Kirk 72 @ yahoo. com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
V and a second of the second o
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☑\$125.00 Filing Fee ☐\$130.00 Filing Fee & ☐\$155.00 Filing Fee & ☐ \$160.00 Filing Fee,

(additional copy is enclosed)

Certified Copy

Mailing Address

٠, ...

L.,

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

Certificate of Status

Street/Courier Address

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

Certificate of Status &

Certified Copy (additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: RK Quintana, (Must end with the words "Limited Liability Company)	L. L. C. iability Company, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street address of the principal office		
Principal Office Address:	Mailing Address:	
3826 SW / AVE Gainesville, FL 32607	<u> </u>	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent. You must designate an in	dividual or
The name and the Florida street address of the registered ag		
Ricardo Quin- Name 3826 SW / Ave	tana	: 20
2021 St. 1 Ava		
Florida street address (P.O. Box N	(OT acceptable)	
—		
Gainesville	Zip	
Having been named as registered agent and to accept service the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblige Chapter Registered Agent's Signature	he appointment as registered agent and agr all statutes relating to the proper and comp ations of my position as registered agent as 605, F.S	ability company at see to act in this lete performance

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Ricardo Quintana
	Gainesville, FL 32607
AMBR	Kelly Quintana
	Gainesville, FL 32407

E V: Effective date, if other than the dective date is listed, the date must be	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
EV: Effective date, if other than the dective date is listed, the date must be of filing.)	late of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
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E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section 605.0 itutes an affirmation under the penaltic aware that any false information subm	specific and cannot be more than five business days prior to or 9 Juntana member or an authorized representative of a member. 0203 (1) (b), Florida Statutes, the execution of this document less of perjury that the facts stated herein are true. nitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of activates an affirmation under the penaltic aware that any false information submitutes a third degree felony as provide	Duentana paember or an authorized representative of a member. 20203 (1) (b), Florida Statutes, the execution of this document less of perjury that the facts stated herein are true. nitted in a document to the Department of State and for in s.817.155, F.S.) Kelly Quentana Typed or printed name of signee
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section 605.0 intutes an affirmation under the penaltic	Duentana paember or an authorized representative of a member. 20203 (1) (b), Florida Statutes, the execution of this document less of perjury that the facts stated herein are true. nitted in a document to the Department of State and for in s.817.155, F.S.) Kelly Quentana Typed or printed name of signee

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