

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Please retain original filing
date of submission 4/7

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
R.C.H., LLC

Certificate of Status	0
Certified Copy	0
Page Count	086
Estimated Charge	\$125.00

14 APR - 7 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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14 APR - 8 PM 2:46
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TALLAHASSEE, FLORIDA

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4/8/2014 8:31:20 AM PAGE 1/001 Fax Server



April 8, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: R.C.H., LLC
REF: W14000022099

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P12000001916.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

FAX Aud. #: H14000082424
Letter Number: 314A00007448

RE-SUBMIT

Please refile initial filing
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RECEIVED
14 APR -8 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E.H.E., 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:

Angela Courington

Name of Person

Performance Designs

Firm/Company

1300 E. International Speedway Blvd

Address

Deland, FL 32724

City/State and Zip Code

Angela@PerformanceDesigns.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Courington

Name of Person

386

Area Code

738-2225

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

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Bill J. Coe
200 Lake Maladage Rd
Deland FL 32724

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 APR - 7 PM 4:30

FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 4-1-14 (OPTIONAL)
(If an effective date is stated, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Bill J. Coe
Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1)(b), 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.817.135, P.S.)

Bill J. Coe

Typed or printed name of signer

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)