14000068633

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
APR 2 8 2016	
A. LUNT	
W14-18976	2

Office Use Only



200257515442

03/19/14--01008--005 **125.00

2014 APR 25 PH 3:27



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2014

RICHARD ROBINSON 2915 BANYAN HILL LN LAND O LAKES, FL 34639

SUBJECT: RR APPRAISAL SERVICE LLC

Ref. Number: W14000018972



We have received your document for RR APPRAISAL SERVICE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: R & R APPRAISAL SERVICES L.L.C., document number L09000071767.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Agnes Lunt Regulatory Specialist II

Letter Number: 914A00006415

COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: DD Approinal Carries	2014 APR 25 PM 32 P
SUBJECT: RR Appraisal Service Name of Limited Liability Company	
reading of Elithica Elability Company	
	75 N
The enclosed Articles of Organization and fee(s) are submitted for filing.	公型
	원생 그
Please return all correspondence concerning this matter to the following:	(12) (L)
Richard Robinson	
Name of Person	
RR Appraisal Service	
Firm/Company	
· ····· • · · · · · · · · · · · · · · ·	
2915 Banyan Hill Ln	
. Address	
Land O Lakes, Florida 34639	
City/State and Zip Code	
t and any code	
rrappraisals@verizon.net	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
For turtuel information concerning this matter, please can.	
•	
Richard Robinson at (813) 507-0020	
Name of Person Area Code Daytime Telephone Number	
Francisco di a caballa Caraba Callandia como d	
Enclosed is a check for the following amount:	
☑ \$125.00 Filing Fee	ng Fee.
Certificate of Status Certified Copy Certificate of	
(additional copy is enclosed) Certified Co	
(additional cop	y is enclosed)
Malling Address	
<u>Mailing Address</u> Registration Section Street/Courier Address Registration Section	
Division of Corporations Registration Section Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
The hame of the Emitted Elability Company is.		
		70 AP
RR Appraisal Service LLC.		the fact that
(Must end with the words "Lin	nited Liability Company, "L.L.C.," or '	"LLC.")
ADDICLER		25 L
ARTICLE II - Address: The mailing address and street address of the principal transfer address and street address of the principal transfer address.	and office of the Limited Liebility Com-	
The maining address and street address of the princip	bal office of the Limited Claumty Com	pany is:
Principal Office Address:	Mailing Address:	
2915 Banyan Hill Ln.	2915 Banyan Hill Ln	
Land O Lakes, Florida 34639	Land O Lakes, Florida 3463	39
		•
ARTICLE III - Registered Agent, Registered Off		
(The Limited Liability Company cannot serve as its	own Registered Agent. You must design	gnate an individual or
another business entity with an active Florida regist	ration:)	
The name and the Florida street address of the regis	tarad agant ara	
The name and the Florida street address of the regis	tered agent are.	,
Richard Robinson		
	lame	
2915 Banyan Hill Ln		
Florida street address (P.O.	. Box <u>NOT</u> acceptable)	
Land O Lakes	DY 24620	
<u>Land O Lakes</u> City	FL 34639	
City	Zip	
Having been named as registered agent and to acce	nt carries of process for the above state	el limitad liability company at
the place designated in this certificate, I hereby a		
capacity. I further agree to comply with the provis		
of my duties, and I am familiar with and accept the		
	Chapter 605, F.S	, , , , , , , , , , , , , , , , , , ,
	•	
1/6/		
_wy		
Registéred Agent's S	Signature (REQUIRED)	

Page 1 of 2

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	Name and Address.
"MGR" = Manager	
AMBR	Richard Robinson
	2915 Banyan Hill Ln
	Land O Lakes, Florida 34639
June Robinson MGR	June Robinson 2915 Banyan Hill Ln Land O Lakes, Florida 34639
	2915 Banyan Hill Ln
	Land O Lakes, Florida 34639
	4 25 4 A S S
(Use attachment if necessary)	
LE V: Effective date, if other than the d	ate of filing:
LE V: Effective date, if other than the d	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
LE V: Effective date, if other than the diffective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
LE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
LE V: Effective date, if other than the diffective date is listed, the date must be e of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
LE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) LE VI: Other provisions, if any.	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 day
LE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 day
LE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
ELE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) ELE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation units)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true.
ELE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) ELE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation under that any false in	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
ELE V: Effective date, if other than the d ffective date is listed, the date must be e of filing.) ELE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false in constitutes a third degree fe	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State slony as provided for in s.817.155, F.S.)
ELE V: Effective date, if other than the d ffective date is listed, the date must be e of filing.) ELE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation un I am aware that any false in constitutes a third degree fe	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State

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)