## 11400097107

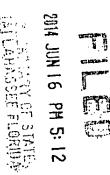
(Red	questor's Name)	
(Add	lress)	
. (Add	lress)	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



800261236488

06/16/14--01049--014 \*\*130.00



UUN 1,7 2014 ), BRUC:

## **COVER LETTER**

Division of Corporations		
SUBJECT: Real Value Book LLC.		
	Name of Limited Liability Company	
The enclosed Articles of Organization as	nd fee(s) are submitted for filing.	
Please return all correspondence conce	rning this matter to the following:	
Randy Eddy		
•	Name of Person	
Real Value Book L <u>LC.</u>	•	
Real Value Book LLC.	Firm/Company	
630 County Road 13A South		
	Address	
Elkton, FL 32203		
	City/State and Zip Code	(1) (2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
1reddy@wildblue.net		
E-mail ac	ddress: (to be used for future annual report notification)	
For further information concerning this n	natter, please call:	SS 6
Randy Eddy	at ( <u>904</u> ) <u>501- 2225</u>	
Name of Person	Area Code Daytime Telephone Numb	per AGE 7
Enclosed is a check for the following am	nount:	
\$125.00 Filing Fee X \$130.00 Fil Certificate	of Status Certified Copy Certific (additional copy is enclosed) Certific	00 Filing Fee, icate of Status & ed Copy nal copy is enclosed)

Mailing Address

TO:

**Registration Section** 

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

Real Value Book LLC. ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Real Value Book LLC. (Must contain the words "Limited Liability," "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Malling Address: Principal Office Address: Real Value Book LLC. Real Value Book LLC. 630 County Road 13A 630 County Road 13A Elkton, FL 32203 Elkton, FL 32203 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: Randy Eddy Name

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 605, F.S..

FL 32203

Zip

(CONTINUED)

Registered Agent's Signature (REQUIRED)

630 County RD 13A Sp. 47/

City

Elkton

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

Page 1 of 2

2814 JUN 16 PH 5: 12

Title:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
AMBR	Randy Eddy
	630 County RD 13A SOLUTA
	Elkton, Fi 32203
ton	Tave LIB Consinting 11 C
MGR	Tara HIII Specialties, LLC PO Box 6
	St. Augustine, FL 32085
	Oli Magazino - E Ozoo
V: Effective date, if other than the date ctive date is listed, the date must be s	of filing:
of filling.)	
V: Effective date, if other than the date ctive date is listed, the date must be sof filing.)	
V: Effective date, if other than the date ctive date is listed, the date must be sof filing.)	
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.) VI: Other provisions, if any.	
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.) VI: Other provisions, if any.	
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90 days after the second seco
V: Effective date, if other than the date active date is fisted, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with section 6)	member of an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document
V: Effective date, if other than the date extive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with section & constitutes an effirmation und	member of an authorized representative of a member.  05.0203 (1) (b), Florkia Statutes, the execution of this document is the penalties of peniltry that the facts stated herein are true.
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a formation und constitutes an affirmation und I am aware that any false info	member of an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document the penalties of parjury that the facts stated herein are true.
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a formation und constitutes an affirmation und I am aware that any false info	member of an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document the penalties of parjury that the facts stated herein are true.
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (in accordance with section & constitutes an affirmation und I am aware that any false inforcemental constitutes a third degree felicing	member of an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document ter the penalties of perjury that the facts stated herein are true. omation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a formation und constitutes an affirmation und I am aware that any false info	member of an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document ter the penalties of perjury that the facts stated herein are true. omation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (in accordance with section & constitutes an affirmation und I am aware that any false inforcemental constitutes a third degree felicing	member of an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. 05.0203 (1) (b) and the facts of the penalties of perjury that the facts stated herein are true. 05.0203 (1) (b) and the facts of the penalties of perjury that the facts of the penalties of perjury that the facts of the penalties of the penalties of perjury that the facts of the penalties of the
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (in accordance with section & constitutes an affirmation und I am aware that any false inforcemental constitutes a third degree felicing	member of an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of parjury that the facts stated herein are true. 05.0203 (1) (b) and the facts of the document of State only as provided for in a.817.155, F.S.)
V: Effective date, if other than the date ctive date is listed, the date must be sof filling.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  (In accordance with section 6 constitutes an affirmation und I am aware that any false info constitutes a third degree feld Randy Eddy	member of an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document the penalties of parjury that the facts stated herein are true. ornation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)  Typed of primed name of signee

Real Value Book LLC.