Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140002733103)))



H140002733103ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Eax Number

: (850)617-6383

From:

Account Name : CORP USA

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

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

Email Address:

FLORIDA LIMITED LIABILITY CO. RAVCORP LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

B. BOSTICK

Help NOV 2 5 2014

EXAMINER

https://efile.sunbiz.org/scripts/efileovr.exg

CORP USA

9696889908

37:72 PIOS/PS/II

414000273311

2914

Ś

ARTICLES OF ORGANIZATION OF Ravcorp LLC

The undersigned hereby subscribes these Articles of Organization for the purposes of organizing a limited liability company under the laws of the State of Florida.

ı. Name

The name of the limited liability company is Ravcorp LLC (the "Company").

II. MAILING ADDRESS

The mailing address for the Company shall be 15476 NW 77 Ct, #277, Miami Lakes, Florida 33016

III, PRINCIPAL OFFICE ADDRESS

The principal office address for the Company is 15476 NW 77 Ct, #277, Miami Lakes, Florida 33016

IV. REGISTERED AGENT AND REGISTERED OFFICE

The registered agent of this Company shall be Alfred D. Xiques, Esq. whose business address is 2950 SW 27th Avenue, Suite 100, Miami, Florida 33133 which shall be the registered office of this limited liability company.

MANAGEMENT BY MANAGER

This Company shall be a member-managed company

Alfredo D. Xiques, Organiza

11/54/5014 17:26 3056339696

ASU 9ADD

STATEMENT OF ACCEPTANCE OF REGISTERED AGENT OF Ravcorp LLC

In accordance with the Florida Limited Liability Company Act, section 605.0113, the undersigned hereby accepts the appointment as registered agent of the above captioned limited liability company. The registered agent further acknowledges that 2950 SW 27 Ave, Suite 100, Miami, FI 33133 is the business office address of the registered agent, which will be the registered office of the limited liability company for the service of process.

Date: November 24 2014

Nfredo D. Xiques

29H NOV 24 A 5: 39
SEGRETARY OF STATE
ALLOSSEE FI ORIGINATION