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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Rite Buys 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:
Pamela Therrien
Name of Person
Firm/Company
2001 83rd Ave N, Lot 1126
Address
St Petersburg, FL 33702
City/State and Zip Code sales@ritebuys.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pamela Therrien ,,727 ,577-7807
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate Of Status & Certified Copy (additional copy is enclosed)} \text{\$\$\$\$\$ \$\$ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\$\$\$}\$
Mailing Address Street/Courier Address

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Pi		
Rite Buys LLC (Must end with the v	words "Limited Liability Company, "L.L.	.C" or "LLC.")
		, , , , , , , , , , , , , , , , , , , ,
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liabil	ity Company is:
	•	
Principal Office Address:	Mailing Address:	
2001 83rd Ave N, Lot 1126	2001 83rd Ave N, Lot 1126	19-20-
St Petersburg, FL 33702	St Petersburg, FL 33702	
another business entity with an active Flo The name and the Florida street address o	,	
Pamela Therrien		
	Name	
2001 83rd Ave N, Lot 1	126	
Florida street add	dress (P.O. Box <u>NOT</u> acceptable)	
St Petersburg	1. FL 33702	<u></u>
	City Zip	
the place designated in this certificate, capacity. I further agree to comply with	and to accept service of process for the abo I hereby accept the appointment as regist the provisions of all statutes relating to th d accept the obligations of my position as Chapter 605, F.S	tered agent and agree to act in this se proper and complete performance
Jame	la Therrien	JALI SE
Registered	Agent's Signature (REQUIRED) (CONTINUED)	4 NOV 21 CRETARY CAHASSE
	Page 1 of 2	LED 1 AM 9: 43 EEST LORIUS

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Pamela Therrien
	2001 83rd Ave N, Lot 1126
	St Petersburg, FL 33702
E V: Effective date, if other than the date ective date is listed, the date must be sp	of filing: Jam. 15+2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 or
E V: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	of filing: Jam. 15t 2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 o
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