L1500090584

(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:		
W15-338M		

Office Use Only

EFFECTIVE DATE 05/0/15



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05/06/15--01028--008 **125.00



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2015

MICHAEL RALLIS JR. 3101 DASHA PALM DRIVE KISSIMMEE, FL 34744

SUBJECT: RALLIS CONSULTING L.L.C.

Ref. Number: W15000033877

We have received your document for RALLIS CONSULTING L.L.C. 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 unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L13000053120.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 515A00010010

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

2015 HAY -6 PH 3: 1

COVER LETTER

TO: Registration Section Division of Corporations		
Mike Rallis Consults Name of Limit	ng L.L.C. ed Ciability Company	
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Michael Ralli	s J.	
	Name of Person	
Mike Rallis Cons	inlting L. L. C	
	Firm/Company	
3101 Dasha	Palm Drive	
	Address	
Kissimmee,	Address FL 34744 /State and Zip Code	3
rallisenter pris	FL 34744 State and Zip Code Se Se Yahoo (On Figure annual report notification) all:	r
E-mail address: (to be used for	r future annual report notification)	•
For further information concerning this matter, please ca	बाः	
Mrchae Rallis Jr. at (77	12 359-8180	
	Code 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 & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

M; ke Rallis Consulting L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

The mailing address and street address of the principal office of the Limited Liability Company is:

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

Michael Rallis Jr.

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

another business entity with an active Florida registration.)

EFFECTIVE DATE B/DILLS

The name and the Florida street address of the registered agent are:

The name and address of each person auth	norized to manage and control the Limited Liability Company:
Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	3101 Dasha Palm Drive
	Kissimmer, FL 34744
MGR	Mrhail Rallis Jr-
	3101 Dasha Palm Drive
	Kissimmee, FL 34744
	
(Use attachment if necessary)	
(If an effective date is listed, the date must be spec the date of filing.)	f filing: 5/1/2015 (OPTIONAL) ific and cannot be more than five business days prior to or 90 days after tet the applicable statutory filing requirements, this date will not be listed as f State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	es de
Signature of a mem	nber or an authorized representative of a member.
	n 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true.
I am aware that any false it	
constitutes a third decree f	nformation submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)

Page 2 of 2

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)

Typed or printed name of signee

MAY -6 PH 3: I