

L15000 149317

(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:

W15-55130

Office Use Only



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15 AUG 31 PM 12:00
SECRETARY OF STATE
ALLAHBACH, PA 19110

SEP 08 2015
W PAINTER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rimer Properties 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:

Mordekhay Rimer

Name of Person

Talking IP LLC

Firm/Company

42 Somers Ave

Address

Bergenfield NJ 07621

City/State and Zip Code

motirimer@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Moti Rimer

646

772-3455

at (_____) _____

Name of Person

Area 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 &
Certified Copy
(additional copy is enclosed)

\$160.00 Filing Fee,
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2015

MORDEKHAY RIMER
42 SOMER AVE
BERGENFIELD, NJ 07621

SUBJECT: RIMER PROPERTIES LLC
Ref. Number: W15000055130

RECEIVED SEP 04 2015

We have received your document for RIMER PROPERTIES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6052.

WESTLEE A PAINTER
Regulatory Specialist II

Letter Number: 815A00017323

FILED
15 AUG 31 PM 12:00
SECRETARY OF STATE
AND CLERK OF THE SUPREME COURT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rimer Properties LLC

(Must end with the 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 Liability Company is:

Principal Office Address:

Mordekhay Rimer

42 Somers Ave

Bergenfield NJ 07621

Mailing Address:

Sabrina Lewitinn

42 Somers Ave

Bergenfield NJ 07621

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:

Tamar Elsdunne

Name

4000 SW 70th Terrace

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

Davie

FL

33314

City

State

Zip

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

MGR

AMBR

Name and Address:

Mordekhay Rimer
42 Somers Ave
Bergenfield NJ 07621

Sabrina Lewitinn
42 Somers Ave
Bergenfield NJ 07621

Tamar Elsdunne
4000 sw 70th Terrace
Davie FL 33314

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member:

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Tamar Elsdunne

Typed or printed name of signee

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)

15 AUG 31 PM 12:00
SECRETARY OF STATE
ALL ASSESSED 7/27/15