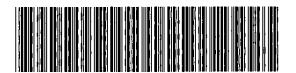
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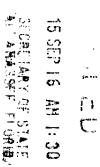
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Reject Effective WIS-SCI232
W15-5C1232

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2015

STACEY FOX 19101 SW 63RD ST SOUTHWEST RANCHES, FL 33332

SUBJECT: RHOADES HOLDINGS LLC

Ref. Number: W15000054232

We have received your document for RHOADES HOLDINGS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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: 515A00017015

Change made. Please se attached

www.sunbiz.org

## COVER LETTER

то:	Registration Division of C			
SUBJE	CT: <u>Rhoade</u>	s Holdings LLC. Name of Lim	nited Liability Company	
The enc	losed Articles	of Organization and fee(s) ar	e submitted for filing.	
Please r	eturn all corres	pondence concerning this ma	atter to the following:	
	Stacey Fo	ox	Name of Person	
	Rhoades	Holdings LLC.	Firm/Company	
	19101 S\	N 63rd St	Address	
	Southwes	st Ranches, FL 33332	ity/State and Zip Code	
_sta	icevnfox@gm		d for future annual report notifica	
		E-mail address: (to be used		uion)
Stacey	/ Fox Nan	at ( !	954 ) 328-2284 Area Code Daytime Te	lephone Number
Enclose	ed is a check fo	r the following amount:		
☑ \$125,00	O 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)
				28 (3) 4

Mailing Address
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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLESOF ORGANIZATION FOR ES	ONDA EMITED MADILETT COMPANY
ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
Rhoades Holdings LLC.	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office.	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19101 SW 63rd St	19101 SW 63rd St
Southwest Ranches, FL 33332	Southwest Ranches, FL 33332
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	Registered Agent. You must designate an individual or
The name and the Florida street address of the registered a	ngent are:
Stacey Fox	
Name	
19101 SW 63rd St	
Florida street address (P.O. Box	NOT acceptable)
Southwest Ranches	FL 33332
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions o of my dutics, and I am familiar with and accept the obli Chapte	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this if all statutes relating to the proper and complete performance igations of my position as registered agent as provided for in 605, F.S
Registered Ageny's Signat	ure (REQUIRED)
(CONTINUI	ED)
Page 1 of 2	

d Address:	
V 50V	
Y FOX SW 63RD ST	
WEST RANCHES, FL 33332	<del></del>
WEST RANCHES, FL 33332	<del></del>
LRHOADES	_
SW 63RD ST	
WEST RANCHES, FL 33332	<del></del>
	·····
<del></del>	<del></del>
15-1 <u>5</u> (OPTION)	
<u> </u>	
horized representative of a member. Florida Statutes, the execution of this definer are done and document to the Department of Str in s.817.155, F.S.)	true.
Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of S	true.
Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of S	true. tate
Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of Str in s.817.155, F.S.)	true.
Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of Str in s.817.155, F.S.)  ted name of signee	true. tate
Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of Str in s.817.155, F.S.)	true.
Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of Str in s.817.155, F.S.)  ted name of signee	true.
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Floridal Statutes, the execution of this do f perjury that the facts stated herein are d in a document to the Department of Str in s.817.155, F.S.)  ted name of signee	true.
Flor f pe d in r in ted	idd Statutes, the execution of this dorigny that the facts stated herein are a document to the Department of S is.817.155, F.S.)  name of signee

ARTICLE IV-