

10/5/2015

L15000238556

Florida Department of State

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.

(((H15000238556 3)))



H150002385563ABC2

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
Fax Number : (850)617-6381

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

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

Email Address: _____

RECEIVED
15 OCT -5 AM 7:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Reeva's 'ritings with Ruach LLC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT -5 PM 8:31

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

FAX AUDIT # H150002385563

**ARTICLES OF ORGANIZATION
OF
Reeva's'ritings with Ruach LLC**

ARTICLE I NAME

The name of the limited liability company is: Reeva's'ritings with Ruach LLC

ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be:
3883 Mossy Oak Drive, Fort Myers, Florida 33905.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Reeva Shaffer, 3883 Mossy Oak Drive, Fort Myers, Florida 33905. Located in the County of Lee.

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.

Signature: 
Reeva Shaffer

Date: 10/4/2015

ARTICLE IV MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the name and address of the member of the Limited Liability Company is:
Reeva Shaffer, 3883 Mossy Oak Drive, Fort Myers, Florida 33905

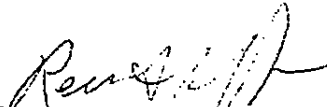
FAX AUDIT # H150002385563

FILED
15 OCT -5 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT # H150002385543

ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.

 Date: 10/4/2015
(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.)

Reeva Shaffer, Organizer

Authorized Representative

FAX AUDIT # H150002385543