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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				
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Special Instructions to Filing Officer:				
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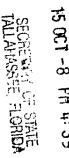




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SEURLTARY OF STAIL
TALLAHASSEE, FI DAIL







COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: R + S SolutionS
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:
Reginald Smth Jr. Name of Person
Enterprise Firm/Company
5427 Appledore Lane Address
City/State and Zip Code Reginald So Tregnail - Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Reginald Smith Tat (850) 321-1295 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ATTIONE ALE

ARTICLE I - Name: The name of the Limited Liability Company is:	of America		15 OCT -8 PM 4: 39
R4S Solutions	DI FINICION	bhC	SECHERRY OF STATE TALLAHASSEE FLORIDA
(Must end with the words "Limited Liability C	ompany, "L.L.C.," or "LI	.C.")	THU AHASSEE FLORIDA

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
5427 Appletie Lane Tourhassee Florida 32309	5427 Appledone Lane Tallahassee Florida 32309

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:

Reginald Smith Th.

Name

5427 Appledore Lane 1

Florida street address (P.O. Bix NOT acceptable)

Tallahassee Florida 33399

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..

(CONTINUED)

gent's Signature (REQUIRED)

Page 1 of 2

ARTICLE IV- The name and address of each person authors.	orized to manage and control the Lin	ANL) nited Liability Company D	
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	SECHETARY OF STATE TALLAHASSEE FLORIDA	
AMBR	Pegnald Smir 5427 Appledag L Tallahagge Florid	44 Sr.	
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be spective date of filing.) Note: If the date inserted in this block does not me the document's effective date on the Department of ARTICLE VI: Other provisions, if any.	ific and cannot be more than five be et the applicable statutory filing requ	usiness days prior to or 90 days after	
This document is execute I am aware that any false i	aber or an authorized representation in accordance with section 605.020 information submitted in a document felony as provided for in s.817.155, in the section is section.	03 (1) (b), Florida Statutes. to the Department of State	
- Ragna'	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)