

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : GREENSPOON MARDER, P.A.
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: raemissigman@gmail.com

FLORIDA LIMITED LIABILITY CO.
RAE MISSIGMAN, LLC

Certificate of Status	0
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Corporate Filing Menu

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ARTICLES OF ORGANIZATION
OF
RAE MISSIGMAN, LLC

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THE UNDERSIGNED, pursuant to the provisions of Chapter 605 of the Florida Revised Limited Liability Company Act, for the purpose of forming a Florida Limited Liability Company (the "Company") under the laws of the State of Florida does set forth the following:

ARTICLE I - Name:

The name of the Limited Liability Company is RAE MISSIGMAN, LLC

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 3304 Pond Pine Road, Harmony, Florida 34773.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is:
Rae Missigman, 3304 Pond Pine Road, Harmony, Florida 34773.

ARTICLE V - Management:

Initially, the Company shall be manager managed and the initial manager shall be as listed below; provided, that the Company may determine, from time to time, to become member managed or change the manager from time to time and the Company reserves the right to update such information through its annual report filings, amendments to the Company's operating agreement, or as otherwise provided by applicable law.

Rae Missigman
3304 Pond Pine Road
Harmony, Florida 34773

Whereof, the undersigned authorized representative of the members has executed these Articles the 4 day of March 2016.

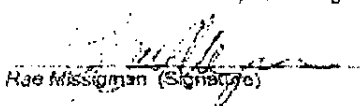

Rae Missigman
Authorized Representative of Member

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

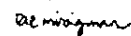
1. The name of the Limited Liability Company is:
RAE MISSIGMAN
2. The name and address of the registered agent and office is:
RAE MISSIGMAN
3304 Pond Pine Road, Harmony, Florida 34773

*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.*


Rae Missigman (Signature)

March 3, 2016

Regards,
Rae


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raemissigman.com

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