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16 AUG 22 AM 9:19  
TALLAHASSEE, FL 32310  
TDA  
8/30/16

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: R & L Home Check 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:

Larry Rumbaugh  
Name of Person

R & L Home Check LLC  
Firm/Company

4425 Waterscape Lane  
Address

Fort Myers, FL 33966  
City/State and Zip Code

rkb@northstate.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Rumbaugh at ( 412 ) 480-0018  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|---|---|

**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

R & L Home Check LLC  
4425 Waterscape Lane  
Fort Myers, FL

**INITIAL LIST OF MEMBERS**

The following named person(s) shall constitute the initial members of R & L Home Check LLC:

Larry Rumbaugh  
4425 Waterscape Lane  
Fort Myers, FL 33966

Robert Black  
4610 Waterscape Lane  
Fort Myers, FL 33966

  
\_\_\_\_\_  
Larry Rumbaugh, Organizer

8-19-16  
Date

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

R & L Home Check 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:**

**Mailing Address:**

4425 Waterscape Lane

Fort Myers, FL 33966

4425 Waterscape Lane

Fort Myers, FL 33966

**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:

Larry Rumbaugh

Name

4425 Waterscape Lane

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

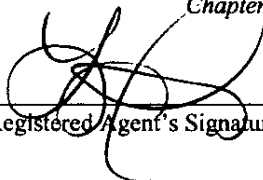
Fort Myers

City

FL 33966

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)

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SECRETARY OF STATE  
FLORIDA

**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

**Name and Address:**

Larry Rumbaugh

4425 Waterscape Lane

Fort Myers, FL 33966

Robert Black

4610 Waterscape Lane

Fort Myers, FL 33966

(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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0207 (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.)

Larry Rumbaugh

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 22 AM 9:19  
STATE OF FLORIDA  
DEPARTMENT OF STATE