## L16000178956

(D
(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:





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08/01/16--01006--008 \*\*125.00



T HENDERSON SEP 2 6 2016

ANTHE STORY



August 11, 2016

RICHARD BEATO 16923 SW 215 TERRACE MIAMI, FL 33187

SUBJECT: RICKY B'S CATERING Ref. Number: W16000055794

We have received your document for RICKY B'S CATERING and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. 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.

TANYA L HENDERSON Regulatory Specialist II

Letter Number: 216A00016973

## **COVER LETTER**

	Registration Section Division of Corporations					
SUBJEC	Ricky B's Catering					
SUBJEC		imited Liabilit	ty Company			
The enclo	osed Articles of Organization and fee(s)	are submitted	for filing.			
Please ret	turn all correspondence concerning this r	matter to the fo	ollowing:			
	Richard Beato					
		Name of	Person			
	Firm/Company					
	16923 SW 215 Terrace					
	Address Miami, Florida 33187					
	ricbeato@bellsouth.net	City/State and	l Zip Code			
	E-mail address: (to be use	ed for future at	nnual report notification)			
For further	information concerning this matter, plea	ase call:				
	Richard Beato	786	486-7400			
	Name of Person	Area Code	Daytime Telephone Number			
Enclosed	is a check for the following amount:					
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certifie	0 Filing Fee & \$160.00 Filing Fee, cld Copy Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailing address and street a			
<del>-</del>	ddress of the principal of	fice of the Limited	Liability Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
16923 SW 215 Terra	ice	1692	3 SW 215 Terrace
Miami, Florida 33187		Mian	ni, Florida 33187
another business entity with an a	active Florida registration	.)	t's Signature: /ou must designate an individual or
,	active Florida registration	.)	
,	active Florida registration address of the registered	.) agent are: Name	
,	active Florida registration address of the registered a	.) agent are: Name	ou must designate an individual or
,	active Florida registration address of the registered a Richard Beato  16923 SW 215 Terrace	.) agent are: Name	ou must designate an individual or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Richard Beato
	16923 SW 215 Ter
	Miami, Florida 33187
(Use attachment if necessary)	
•	
RTICLE V: Effective date, if other than the date of fili	(ODTIONAL)
Troub Breen to date, it offer than the date of the	ing: (OPTIONAL)
an effective date is listed, the date must be specific	and cannot be more than five business days prior to or 90 days after
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Typed or printed name of signee

egge a State

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)