

L17 DOD 141531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. FASON

JUN 30 2017

FILED

17 JUN 29 14:10:45

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: RPV Capital, 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:

Ambrogio De Palma

Name of Person

Firm/Company

2748 East Commercial Blvd

Address

Fort Lauderdale, FL 33308

City/State and Zip Code

ambrodip@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ambrogio De Palma 954 776-2664
at ()
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 ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, 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 I - Name:

The name of the Limited Liability Company is:

RPV Capital, LLC

(Must contain 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:

RPV Capital, LLC

2748 East Commercial Blvd.

Fort Lauderdale, FL 33308

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:

Max Sebastiani

Name

2748 East Commercial Blvd.

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

Fort Lauderdale

FL

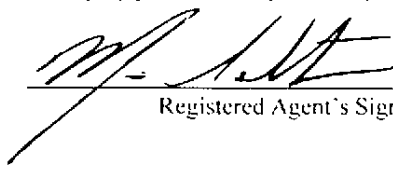
33308

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

17 JUN 29 AM 10:45
FALLS CHURCH, VA 22034

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

Name and Address:

American Dreams USA, LLC

3800 Oaks Club House Drive, Unit 104

Pompano Beach, FL 33069

MGR

Daniel Mancini

2748 East Commercial Blvd.

Fort Lauderdale, FL 33308

MGR

Ambrogio De Palma

2748 East Commercial Blvd.

Fort Lauderdale, FL 33308

MGR

David Sherman

2748 East Commercial Blvd.

Fort Lauderdale, FL 33308

(Use attachment if necessary)

(cont. on next page)

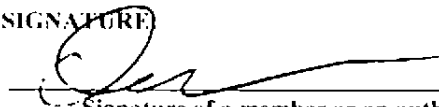
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Daniel Mancini

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)

Attachment to Articles of Organization for Florida Limited Liability Company
RPV Capital, LLC

ARTICLE IV – (cont.)

Title:

Name and Address:

MGR

Danielle Sherman
2748 East Commercial Boulevard
Fort Lauderdale, FL 33308