

L17000179661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

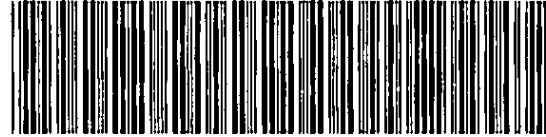
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800302003338

08/04/17--01012--021 **125.00

17 AUG 21 AM 8:09
SECRETARY OF STATE
TALLAHASSEE FLORIDA

17 AUG 21 AM 8:09

8/23/17

**ROBERT D. LOVENTHAL
LAW OFFICES**

**15 Hammersmith Road Unit 13
Newport, Rhode Island 02840**

Telephone (401) 846-1351

Telephone (617) 501-8285

Telefax (401) 847-0818

Email: RDLLAW99@aol.com

August 16, 2017

New Filing Section
Division of Corporations
Section Name
P.O. Box 6327
Tallahassee, FL 32314

RE: Request to File Articles of Organization for Rando Investments, LLC

Ref number: W17000064314

Dear Sir/Madam,

Enclosed please find a copy of the Articles of Organization for Rando, LLC which is hereby submitted for filing. I am also enclosing a copy of the rejected letter received for Rando, LLC.

Very truly yours,



Robert D. Loventhal

RECEIVED
17 AUG 21 PM 4:31
BUREAU OF CORPORATE
INFORMATION SERVICES

COVER LETTER

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

SUBJECT: Rando Investments, 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:

Robert D. Loventhal

Name of Person

Robert D. Loventhal Law Offices

Firm/Company

15 Hammersmith Road Unit 13

Address

Newport, RI 02840

City/State and Zip Code

RDLLAW99@aol.com

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

For further information concerning this matter, please call:

Shelly Rando

617

947-6340

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2017

ROBERT D. LOVENTHAL LAW OFFICES
15 HAMMERSMITH ROAD UNIT 13
NEWPORT, RI 02840

SUBJECT: RANDO, LLC
Ref. Number: W17000064314

We have received your document for RANDO, LLC 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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note 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.," "LC.," "Ltd.," and "Co."

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.

Neysa Culligan
Regulatory Specialist II

Letter Number: 317A00015950

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rando Investments, 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:

8132 Gebera Drive #6301

Naples, FL 34113

Mailing Address:

8132 Gebera Drive #6301

Naples, FL 34113

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:

Shelly Rando

Name

8132 Gebera Drive #6301

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

Naples

Florida

34113

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)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

17 AUG 21 AM 8:18

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Marilyn Rando

8132 Gebera Drive #6301 Naples, FL 34113

AMBR

Crystal Rando-Ofria

8132 Gebera Drive #6301 Naples, FL 34113

MGR

Shelly Rando

8132 Gebera Drive #6301 Naples, FL 34113

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: July 25, 2017 (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.

Shelly Rando

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)

17 AUG 21 AM 8:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA