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(F	Requestor's Name)
(A	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(0	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

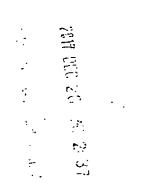
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TO:

New Filing Section

Division of Corporations
SUBJECT: RER MOSONry & Concrete 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:
Felicia Riverbark Name of Person
52 foxwood DR
Address
thuana +1. 32333
City/State and Zip Code Felicia Civenbark agricul - com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Telicia al (850) 363-0505 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certificate of Status & Certificate Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Title:		Same and Address:
"AMBR" = Authori: "MGR" = Manager		Felicia Rivenbark 52 Fossupod OR Howana Fl. 32333
		
 		
(Use attachment if	necessary)	
1 C.M. Difference data	. If other than the date o	of filing: (OPTIONAL)
THE V. LICCUIVE GARC	, the date must be spec	cific and cannot be more than five business days prior to or 90 days
ffective date is listed e of filing.) If the date inserted ir	n this block does not me	eet the applicable statutory filing requirements, this date will not be li
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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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
RER masonry &	Concrete LLC
(Must contain the words "Limited Liability Cor	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the I	Limited Liability Company is:
Principal Office Address:	Mailing Address:

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 mother business entity with an active Florida registration.)	l or
The name and the Florida street address of the registered agent are:	

Felicia Rivenbark

Same

Same

DR.

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

Havana Fl 33333

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)