L18000251053

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Entry Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only

N. SAMS 0CT 2.9 2018



800319458378

10/25/18--01021--011 ++180.00

18 0CT 25 PM 4: 04

TRANSMITTAL LETTER

TÖ: Registration Section
Division of Corporations

SUBJECT: REFEI, 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:

ROXANNE E. FRANCHINI

(Name of Person)

REFEI, LLC

(Firm/Company)

1425 OCEAN SHORE BLVD, APT. 804

(Address)

ORMOND BEACH, FL 32176

(City/State and Zip Code)

For further information concerning this matter, please call:

JERRY C. KNIGHT (Name of Person) at 386 437-6744 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ **\$125.00** Filing Fee

S130.00
Filing Fee &
Certificate of Status

S155.00
Filing Fee &
Certified Copy

☐ \$160.00
Filing Fee,
Certificate of Status
& Certified Copy

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	CI	\mathbf{F}	I - 1	Na	m	e

The name of the Limited Liability Company is:

REFEI, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address

1425 OCEAN SHORE BLVD, APT. 804 ORMOND BEACH, FL 32176

Mailing Address:

1425 OCEAN SHORE BLVD, APT. 804 ORMOND BEACH, FL 32176

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

ROXANNE E. FRANCHINI

(Name)

1425 OCEAN SHORE BLVD, APT. 804

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

ORMOND BEACH, FL 32176

City, State, and 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 608, F.S.

Registered Agent's Signature

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	OWNERSHIP	Name and Address:
"MGR" = MANAGER	100.0%	ROXANNE E. FRANCHINI.
		1425 OCEANSHIORE BLVD
		APT. 804
		ORMOND BEACH, FL 32176

ATRICLE V-Purpose

THE PURPOSE OF THIS LLC IS TO MANUFACTURE, PRODUCE, PURCHASE OR OTHERWISE AQUIRE, SELL, RENT, IMPORT, EXPORT, DISTRIBUTE AND DEAL IN GOODS, WARES, SERVICES, MERCHANDISE AND MATERIALS OF ANY KIND AND DESCRIPTION INCLUDING PORVIDING EXECUTIVE INTERVIEWING SERVICES AND PROVIDING RELATED SERVICES. THE FOREGOING PURPOSES AND ACTIVITIES WILL BE INTERPRETED AS EXAMPLES ONLY AND NOT LIMITATIONS, AND NOTHING THEREIN SHALL BE DEEMED AS PROHIBITING THE LLC FROM EXTENDING ITS ACTIVITIES TO ANY RELATED OR OTHERWISE PERMISSIBLE LAWFUL BUSINESS PURPOSES WHICH MAY BECOME NECESSARY, PROFITABLE OR DESIRABLE FOR THE FURTHERANCE OF COMPANY OBJECTIVES EXPRESSED ABOVE.

ARTICLE V-Effective Date

THE EFFECTIVE DATE OF THIS LIMITED LIABILITY COMPANY SHALL BE: **NOVEMBER 1, 2018.**

REQUIRED SIGNATURE:

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROXANNE E. FRANCHINI

Typed or printed name of signee