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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

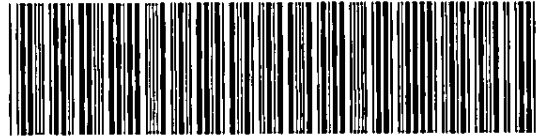
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SECRETARY OF STATE
DIVISION OF CORPORATION
18 NOV 14 AM 5:04
TALLAHASSEE, FLORIDA



405 SOUTH MAIN STREET, SUITE 800
SALT LAKE CITY, UTAH 84111
TELEPHONE (801) 530-7359
FAX (801) 364-9127

TO CONTACT WRITER DIRECTLY
(801) 530-7359
greg@tmglaw.com

Gregory C. Zaugg

9 November 2018

Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: RWR Ventures, LLC
Articles of Organization
Designation of Registered Agent

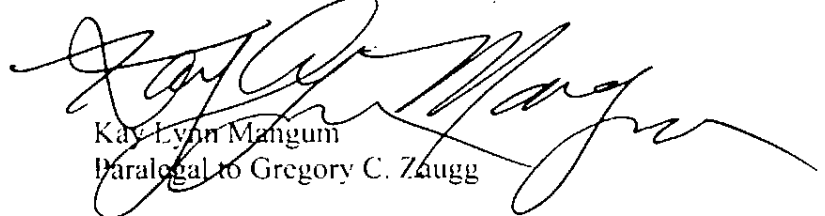
Dear Division of Corporations:

Please find enclosed the Articles of Organization and Designation of Registered Agent in duplicate for RWR Ventures, LLC, along with our check no. 3102 in the amount of \$130.00 made payable to the Florida Department of State for the filing fee (\$125.00). Please return a copy of the filed Articles of Organization and Designation of Registered Agent in the enclosed self-addressed, stamped envelope.

We appreciate your assistance in this matter. Should you have any questions regarding this letter or the enclosed documents, please do not hesitate to contact me at 801.530.7359.

Sincerely,

THE McCULLOUGH GROUP, LLC



Kay Lynn Mangum
Paralegal to Gregory C. Zaugg

GCZ:klm
Enclosures

COVER LETTER

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

SUBJECT: RWR Ventures, 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:

Gregory C. Zaugg
Name of Person

The McCullough Group, LLC
Firm/Company

405 South Main Street, Suite 800
Address

Salt Lake City, Utah 84111
City/State and Zip Code

robbyreid5@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kay Lynn Mangum at (801) 530-7359
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:

RWR Ventures, 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:

1206 Brook Bend Road
Pensacola, Florida 32506

1206 Brook Bend Road
Pensacola, Florida 32506

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:

Robert William Reid

Name

1206 Brook Bend Road

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

Pensacola

Florida

32506

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)

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STATE
TALLAHASSEE, FLORIDA

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

AMBR

MGR

MGR

Name and Address:

Robert William Reid
1206 Brook Bend Road
Pensacola, Florida 32506

Heather Marie Reid
1206 Brook Bend Road
Pensacola, Florida 32506

Robert William Reid
1206 Brook Bend Road
Pensacola, Florida 32506

Heather Marie Reid
1206 Brook Bend Road
Pensacola, Florida 32506

(Use attachment if necessary)

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.

Robert William Reid

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)

SECRETARY OF STATE
DIVISION OF CORPORATION
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