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(Re	equestor's Name)	
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(Au	ldress)	
(Cil	ty/State/Zip/Phone #	f)
—	—	<u> </u>
PICK-UP	WAIT	MAIL
		<u>, </u>
(Bu	isiness Entity Name	?)
(Do	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
	Office Use Only	
	Once use only	
	K. PAGE	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 15, 2019

HELENA REACH 21 SOUTH END AVE, APT 322 NEW YORK, NY 10280

SUBJECT: REACH FOR SPACE LLC Ref. Number: W18000102244

We have received your document for REACH FOR SPACE LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

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.

Keyna E Page Regulatory Specialist II

Letter Number: 919A00001083

www.sunbiz.org

Division of Comparations DO DOX (2027 Wellshowers Florids 20214)

Helana E. Reach 21 South End Avenue, 322 New York, NY 10280 (917) 596-1071 helanareach@gmail.com

FAX COVERSHEET

To: Attn: Keyna E Page	Date: January 28, 2019
Fax #: 850-245-6804	From: Helana Reach
Phone #: 850-245-6052	No. of Pages: 3 including cover

Dear Keyna,

Please see attached the proper documentation for the registered agent signature for my LLC application.

Thank you! Helana



COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: <u>REACH</u> FOR SPACE 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:

Helana Reach Name of Person REACH FOR SPACE LLC Firm/Company 21 South End Ave Apt 322 Address New Yorle New York 10280 City/State and Zip Code address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount: \$125.00 Filing Fee \$\$130.00 Filing Fee \$\$\$155.00 Filing Fee \$ Certificate of Status Certified Copy (additional copy is enclosed)

S160.00 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 <u>Street Address</u> New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABELITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

REACH FOR SPACE 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:
21 SOUTH END AVE SUITE 308	21 SOUTH END AVE SUITE 308
NEW YORK, NEW YORK 10280	NEW YORK, NEW YORK 10280

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 Fiorida street a	address of the registered ag	ient are:			AL 6	5 1 ~ ·
	ROBERT REACH				N 2	с, 2
	N	ame		- 2)- 	8	
	12529 IMPERIAL ISLE	DRIVE #308		·		1997) 1997) 1997)
	Florida street address (F		ptable)	- 33-	$\dot{\Sigma}$	<i>.</i>
	BOYNTON BEACH	FLORIDA	33437	ĝe	90	
	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 contificate. Thereby 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 T am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

A. J. LET

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

· · · · ·

"MGR" = Manager MGK	Helana Reach
	21 South End Are Apt 322 NY, NY 10280
(Use attachment if necessary)	

(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.

	MMMM/		
Signature of a m This document is exect	tember or an authorized representative of a mem and in accordance with section 605.0203 (1) (b). Flo	o <mark>er.</mark> orida Stat	ntes
I am aware that any fals	the information submitted in a document to the Depar the felony as provided for in s.817.155, F.S.	tment of a	State
Helano	Reads		
	Typed or printed name of signee		5
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	<u>Filing Fees:</u>	i.'	2
S125.00 Filing Fee for Articles of On	rganization and Designation of Registered Agent		\sim
\$ 30.00 Certified Copy (Optional)		-i -	3
S 5.00 Certificate of Status (Optio	nal)		τu
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