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Account Number : 120020000140	WOLMER, RAY, TELEPMAN	& COHEN
Phone : (561)844-3600		
Fax Number : (561)842-4104		
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COVER LETTER

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

R and H Investment of Florida, LLC

SUBJECT:

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:

M. Richard Sapir, Esq.

Name of Person

Cohen Norris Wolmer Ray Telepman Cohen

Firm/Company

712 U.S. Highway One, Suite 400

Address

North Paim Beach, FL 33408

City/State and Zip Code

kd@fcohenlaw.com

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

For further information concerning this matter, please call:

M. Richard Sapir	561	844-3600
	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 & \$155.00 Filing Fee & Certificate of Status

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 Tailahassee, FL 32314

Street Address New Filing Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Taliahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

R and H lavestment of Florida, 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:

Zip

2650 Lake Shore Drive	2650 Lake Shore Drive
Unit 1006	Unit 1006
Riviers Beach, FL 33404	Riviers Beach, FL 33404

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:

M. Richard Sapir Name 712 U.S. Highway One, Suite 400 Plorida street address (P.O. Box NOT acceptable) North Palm Beach ٦Ŧ 33408 City State

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 starfles relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positionare registered agent as provided for in Chapter 605, F.S.

Registored Agent's Signature (REQUIRED) TINUED)

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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:

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This: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Richard Hailey
	2650 Lake Shore Drive, Unit 1006
	Riviera Beach, FL 33404
MGR	Mary Beth Ramey
	2650 Lake Share Drive, Unit 1006
	Riviers Beach, FL 33404
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(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.

RECUIRED SIGNATURE: 0 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 folcoy as provided for in s.817.155, P.S. Mary Beth Ramey, Manager Typed or printed name of signee Filing Fors: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)