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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2018

ROBERT HOOKER
9340 NW 125 AVE
OCALA, FL 34487

SUBJECT: RST, LLC
Ref. Number: W18000091081

We have received your document for RST, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P13000031599.

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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 018A00021454

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**ABSOLUTE
LAW GROUP**
BUSINESS • TAX • ESTATE PLANNING

1-877-218-7101
Fax 352-205-4401
www.AbsoluteLawGroup.com

October 1, 2018

Sumter County
8564 E. County Rd. 466
Suite 303
The Villages, FL 32162

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

Marion County
10230 Southwest 86th Circle
Suite 200
Ocala, FL 34481

Re: **RST, LLC**

Citrus County
547 West Fort Island Trail
Suite H
Crystal River, FL 34429

Dear Sir or Madam,

Enclosed are the necessary documents to create the RST, LLC.

Tampa Bay
26843 Tonic Drive
Suite 101
Wesley Chapel, FL 33544

Please send the certified copy of the Articles of Organization and Designation of Registered Agent to the Registered Agent, Robert Hooker at 9340 N.W. 125 Avenue, Ocala, Florida 34482.

If you have any questions, please contact our office at (352) 205-4455. Thank you for allowing us to help you with your needs. I hope you have a blessed day.

Sincerely,
ABSOLUTE LAW GROUP

Tiffany Hammer

FILED
19 MAY 31 AM 11:31
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: RST, LLC The RST Company, 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:

Robert Hooker

Name of Person

Firm/Company

9340 NW 125 Ave

Address

Ocala, Florida 34482

City/State and Zip Code

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

For further information concerning this matter, please call:

Robert Hooker

Name of Person

at (352)

Area Code

817-6187

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:

RST LLC The RST Company, 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:

9340 NW 125th Ave
Ocala, Florida 34482

Mailing Address:

9340 NW 125 Ave
Ocala, Florida 34482

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.)

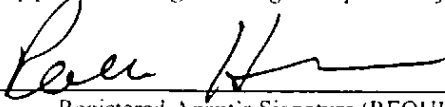
The name and the Florida street address of the registered agent are:

Robert Hooker
Name

9340 NW 125th Ave
Florida street address (P.O. Box NOT acceptable)

Ocala FL 34482
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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19 MAY 31 AM 11:31
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

AMBR

Name and Address:

Robert Hooker
9340 NW 125th Ave
Ocala, Florida 34482

Gary Hooker
9340 NW 125th Ave
Ocala, FL 34482

Ted Hooker
Le Windmill Chase, Apt J
Sparks, Maryland 21152

(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 Hooker

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)

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

19 MAY 31 AM 11:31

FILED