L20000061765

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





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	* *	COVERLETTER
	egistration Section vivision of Corporations	
SUBJECT	RR&NF Properties, LLC	
3030201		Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	rn all correspondence concerning this	s matter to the following:
	Jesse Caedington	
		Name of Person
	Holden, Carpenter & Roscow, PL	
		Firm/Company
	5608 NW 43rd Street	
		Address
	Gainesville, FL 32653	
j	jesse@gnv-law.com	City/State and Zip Code
_	E-mail address: (to be us	sed for future annual report notification)
For further in	nformation concerning this matter, ple	ease call:
	Jesse Caedington	352 373-7788
-	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
\$125.00 Fil	_	S155.00 Filing Fee & S160.00 Filing Fee, 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	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

. CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
RR&NF Properties, LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
6:	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record

UCC 1 or 3 File_____

UCC 11 Search_____

UCC 11 Retrieval____

Courier_

171 Ponder's Printing - Thom (aville GA 8/00

02/24/20

Will Pick Up

Time

Date

Requested by: Seth

Name



February 25, 2020

CAPITAL CONNECTION, INC

SUBJECT: RR & NF PROPERTIES, LLC

Ref. Number: W20000020105

We have received your document for RR & NF PROPERTIES, LLC and your check(s) totaling \$390.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 020A00004148

FILED

12: 23

MINE 230 ON CHIEATION FOR FLORI	DALIMITED LIABILITY COMPANY, COR.
ADTICUTE NO.	FEB 27 PILI2: 23
ARTICLE I - Name:	
The name of the Limited Liability Company is:	SECRETIUM OF STATE
	TALLESTALE
	TALLAHAT SEE, FL
RR&NF Properties, LLC	· ·
(Must end with the words "Limited Liabil	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office o	Folia 1 (minut 1 (abitim on a const
and sales of the principal office of	Tule Limited Liability Company is:
D-111-065 4-1-1	
Principal Office Address:	Mailing Address:
9807 NW 18th Rd.	PO Box 140141
Gainesville, FL 32606	Gainesville, FL 32614
	Gamesville, PL J2014
ADTICLE THE Destinant Annual Annual Policy Control of the	
ARTICLE III - Registered Agent, Registered Office, & Reg	istered Agent's Signature:
(The Limited Liability Company cannot serve as its own Regist	ered 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:
•	
Neil Fleming	
Name	
9807 NW 18th Rd.	
Florida street address (P.O.	Box NOT acceptable)

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 Iam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

State

Gainesville

City

(CONTINUED)

Registered Agent's signature (REQUIRED)

32606

Zip

Page 1 of 2

as

	R" = Authorized Member ' = Manager	Name and Address;
	- Manager	Neil Fleming PO Box 140141
		Gainesville, FL 32614
		SEC. AT
		OF STATE
(Use at	tachment if necessary)	
(11 an effective d the date of filing.	ate is listed, the date must be spe .)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 days aft eet the applicable statutory filing requirements, this date will not be listed
the document's e	effective date on the Department of	f State's records.
ARTICLE VI- O	ther provisions, if any.	

REQUIRED SIGNATURE:

Signature of a member of 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.

Neil Fleming

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)