# 20000238009

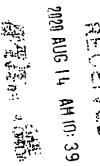
(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Yerk Up
W20-90415





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2020 AUG 17 PM 3: 18

## COVER LETTER

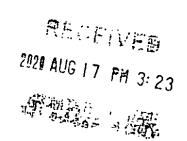
Division of Co		
SUBJECT:	Name of Limited Liability Company	
The enclosed Articles of	Organization and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	· Ricaldo Cersor	
	Name of Person	
	•	
	Firm/Company	
	1802 SYLVAN C+ B	
	Address	
	721/ F3 32303 City/State and Zip Code	
_	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information co	incerning this matter, please call:	
Ricardo	at (850) 461-9011  Area Code Daytime Telephone Number	
Nan	e of Person Area Code Daytime Felephone (Stimber	
Enclosed is a check for t	he following amount:	
C3\$125.00 Filling Fee	TS130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  TS150.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)	

# Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Taffahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303





August 17, 2020

RICARDO CEASOR 1802 SYLVAN CT. B TALLAHASSEE, FL 32303

SUBJECT: R AND L CONSTRUCTION LLC

Ref. Number: W20000090415

We have received your document for R AND L CONSTRUCTION LLC and your check(s) totaling \$160.00. 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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "Ltd.," and "Co."

The document number of the name conflict is L14000125379.

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.

KYLE D BRUMBLEY Regulatory Specialist II

Letter Number: 120A00015581

FILED

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Fability Company is:    Lanch   Sort   Sort   Company   Company	2020 AUG 17 PM 3: 18
The name of the Limited Fability Company is:  RLC Construction services L  Construction LLC	TALLAHASSEE, FL
(Must conatin the words "Limited Liability Company, "L.L.C.," or "LE.C.")	
ARTICLE II - Address:	

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:		
1802 SYLVAN CA B	1802 SYLVAN CL B		
T.11. Fl. 32303	July Fa 32363		

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:

Ricar	Jo Cecs	0
	Name	
1802	SYLVANO C	7 B
Florida street addre	ess (P.O. Box <u><b>NOT</b></u> a	eceptable)
TE 11	FE	32303
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 ceruticate. 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 I am familiar with and accept the obligations of my positioneas registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title: "AMBR" — Authorized Member	Name and Address:
MGR" Manager MS/	1802 Sylvan 21 3 Tally Flay 32325 Ceasol La lacisa 110 9 4/14+ Anc Apt 11-103 Manage Fac 32333
A/VI/312	Angela Davis  5 Clisuckskin Circ ECRETARY OF  AHAGSEL  ANGELA  BEETARY OF
(Use attachment if necessary)	
(If an effective date is listed, the date must I the date of filing.) <u>Note:</u> If the date inserted in this block does the document's effective date on the Departi	date of filing: $6 - 1 - 20$ (OPTIONAL) are specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed ament of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is e I am aware that any constitutes a third d	a member or an authorized representative of a member. Secuted in accordance with section 605,0203 (1) (b). Florida Statutes, false information submitted in a document to the Department of State egree felony as provided for in s.817,155, F.S.
	Cyped 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)