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# COVER LETTER

	New Filing Sec Division of Cor				2921
OF 11 S		stant Traiding LLC			2021 HAV III
SUBJEC	1:	Name of Lim	ited Liabili	y Company	
		Organization and fee(s) are			 23
, , , , , , , , , , , , , , , , , , , ,	RUBIN CO				
	<del></del>	<del></del>	Name of	Person	
	R&M Const	ant Traiding LLC			
	<del></del>		Firm/Co	npany	
	1902 TITUS	СТ			
			Addre	ess	
	ьенісн ас	CRES, FL 33972			
		C	ity/State and	l Zip Code	
	rconstant2000	- ·			<u></u>
	i	E-mail address: (to be used	for future a	nnual report notificati	on)
For further	information co	ncerning this matter, please	call:		
	RUBIN CON	STANT 23		298-4315 )	
	Nam		rea Code	Daytime Telephon	e Number
Enclosed	is a check for the	ne following amount:			
□\$125.0	() Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	5.00 Filing Fee & ed Copy (1 copy is enclosed)	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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

R&M Constant Traid	ling LLC			
(Must cona	itin the words "Limited L	iability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ddress of the principal of	fice of the Limited	Liability Company is:	
<u>Princip</u> :	al Office Address:		Mailing Address:	
1902 TITUS CT		1903	TITUS CT	
LEHIGH ACRES, FI	L 33972	LEH	IIGH ACRES, FL 33972	<del>_</del>
another business entity with an a The name and the Florida street a	active Florida registration	agent are:	You must designate an individual or	
·	active Florida registration address of the registered address of the registered at RUBIN CONSTANT	1.)	Too thust designate an morviousi of	
·	active Florida registration address of the registered	agent are:		
·	active Florida registration address of the registered a RUBIN CONSTANT  1902 TITUS CT Florida street address	agent are:		
·	active Florida registration address of the registered a RUBIN CONSTANT	Name  (P.O. Box <u>NOT</u> a	eceptable)	

(CONTINUED)

ARTICLE IV-

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

EV: Effective date, if other than the date of filing: 3-09-21 (OPTIONAL) ective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.	•	
MGR    RUBIN CONSTANT   1902 TITUS CT		orized Member
MGR  Mimose Constant 1902 TITUS CT LEHIGH ACRES, FL 33972  Mimose Constant 1902 TITUS CT LEHIGH ACRES, FL 33972  EV: Effective date, if other than the date of filing: 3 - 0 4 - 2 1 (OPTIONAL) sective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.  EVI: 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.  PLIBER CONSTANT:	'MGR" = Manag	ger
(Use attachment if necessary)  E.V: Effective date, if other than the date of filing: 3 - 0.9 - 2.1 (OPTIONAL)  ective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.)  'the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.  E.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.  PLIBIN CONSTANT:	MGR	RUBIN CONSTANT
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(Use attachment if necessary)  E V: Effective date, if other than the date of filing: 3 - 0.4 - 2.1 (OPTIONAL) ective date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not ment's effective date on the Department of State's records.  E 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.		LEHIGH ACRES, FL 33972
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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)