L21000479689

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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2821 HOV -9 MM 9: 25

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE 11/9/2021	 REALTY HOLDINGS	**WALK IN**
ENTITY NAME TO T		
DOCUMENT NUMBE	ER	
	PLEASE FILE	THE ATTACHED AND RETURN
	Plaix Copy	
XXXXXXXX	Certified Copy	
	Certificate of Status	
	Certified Copy of Ar Certified Copy of Ar Certificate of Status	ts & Amendments Complete File (Including Annual Reports)
	APOSTILLE'/	/ NOTARIAL CERTIFICATION
COUNTRY OF DESTINA	ATION	
NUMBER OF CERTIFIC		
TOTAL OWED \$_155	.00	ACCOUNT # 120140000108 Littly United Corporate Services, Inc. Thank you so much.
Please call Tina at	the above number for	any issues or concerns. Thank you so much!

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	<u></u>	D
2021 HOV -9	ÁĦ	9: 25
SECTEDAN FILL FOR	• :	STATE

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

RB	REAL	TY	HOL	DIN	GS.	1 1	c

(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:

i ne mani	ing address and street at	ruress of the principal	onice of the 1211	inted Liability Company is.		
	Principal Office Address:			Mailing Address:		
	2000 Island Blvd., Apt. 2709			2000 Island Blvd., Apt. 2709		
	Aventura, FL 33160			Aventura, FL 33160		
(The Limi	E III - Registered Age ted Liability Company usiness entity with an a and the Florida street a	cannot serve as its own ctive Florida registration	n Registered Ag on.)	Agent's Signature: ent. You must designate an	individual or	
		United Corporate Se	ervices, Inc.			
	Name					
	3458 Lakeshore Drive					
		Florida street address (P.O. Box <u>NOT</u> acceptable)				
		Tallahassee	FL	32312		
		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.

Michael A. Barr

Registered Agent's Signature (REQUIRED)

Michael A. Barr, President

(CONTINUED)

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

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Raphael Benaroya