Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000161693 3)))



H220001616933ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for fuffure annual report mailings. Enter only one email address please.\*

Email Address:	
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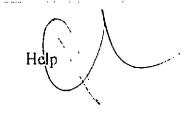
FLORIDA LIMITED LIABILITY CO.

**Really Simple LLC** 

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu



Tallahassee, FL 32314

## **COVER LETTER**

TO:	New Filing Section Division of Corporations					
SUBJE	Really Simple LLC					
		ame of Lim	nited Liab	ility Company		
The enc	losed Articles of Organization and	d fee(s) are	: submitte	d for filing.		
Please r	eturn all correspondence concerni	ing this ma	tter to the	following:		
	Steven Rosenthal					2022 HAY
			Name o	f Person		E S
	Chepenik Trushin LLLP					ASSIA PARTY
			Firm/C	ompany		
	12550 Biscayne Blvd., Suite	805				AM 8: 08
		<del></del>	Add	ress	<u></u>	<u> </u>
	North Miami, FL 33181					
		Ci	ty/State a	nd Zip Code		<u> </u>
	srosenthal@ctllp.com					
				annual report notificat	ion)	
For furthe	r information concerning this mal	ter, please	call:			
	Steve Rosenthal	786 at (	6	378-8121 )		
	Name of Person	Ar	ea Code	Daytime Telephon	e Number	
Enclosed	d is a check for the following amo	unt:				
_	00 Filing Fee	ng Fee &	Certif	i5.00 Filing Fee & ied Copy nal copy is enclosed)	☐\$160.00 F Certificate o Certified Co <sub>1</sub> (additional cop	f Status & py
	Mailing Address New Filing Section			Street Address New Filing Section Di	ivision	
	Division of Corporation P.O. Box 6327	s		The Centre of Tallaha	issec	

Tallahassee, FL 32303

ARTICLE I - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

14154847068

The name of the Limited Liability Company is:			
Really Simple LLC			
(Must contain the words "Limit	ed Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited	Liability Company is:	
Principal Office Address:		Mailing Address	:
6443 D'Orsay Court		D'Orsay Court	
Delray Beach, FL 33484		ay Beach, FL 33484	···
USA	<u>USA</u>	<u> </u>	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its of another business entity with an active Florida registry.) The name and the Florida street address of the registry	own Registered Agent, ation.)	nt's Signature: You must designate an indivi	idual or
Chepenik Trushin	LLLP		<u> </u>
<del></del>	Name		
12550 Biscayne B	lvd., Suite 805		
Florida street add	iress (P.O. Box <u>NOT</u> a	ecceptable)	K 8: 08
North Miami	FL	33181	7.07 <b>60</b>
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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

## ARTICLE IV-

14154847068

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

(Use attachment if necessary)  ELE V: Effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 day te of filing.)		Name and Address:
(Use attachment if necessary)  CLEV: Effective date, if other than the date of filing:  (OPTIONAL)  If the date instreted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.  CLEV: Other provisions, if any, impany shall be a manager-managed limited liability company for purposes of the Florida Revised Limited by Company Act. Only those persons or entities listed as Managers may bind the company in any legal  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 lake information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.  Jacob Slevin, Manager		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)