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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : I2004000031 Phone : (800)906-9220

Fax Number : (800)906-9880

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

Email Address:_____

FLORIDA LIMITED LIABILITY CO.

Richard Abbate Enterprises LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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t	ARTICLE I - Name:			
-	The name of the Limited Liability Company is:			
	Richard Abbate Enterprises LLC			
	(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:			
	Principal Office Address:	Mailing Address:		
	2704 SW Bear Paw Trail, Palm City, FL 34990	2704 SW Bear Paw Trail, Palm City, FL 34990		

(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:

Richard Abbate					
Name					
2704 SW Bear Paw	Trail				
Florida street addres	ss (P.O. Box <u>NOT</u> ac	ceptable)			
Palm City	FL	34990			
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..

Richard Abbate	
Registered Agent's Signature (REQUIRED)	

(CONTINUED)

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Title: "AMBR" = Authorized Meml	<u>Name and Address;</u> b er
"MGR" = Manager	
AMBR	Richard Abbate
	2704 SW Bear Paw Trail
	Palm City, FL 34990
AMBR	Vicent Abbate
	2704 SW Bear Paw Trail
	Palm City, FL 34990
f an effective date is listed, the date in the date in the date of filing.)	
REQUIRED SIGNATURE:	
REOUIRED SIGNATURE:	Richard Abbate
Signatu	Richard Albate are of a member or an authorized representative of a member.
Signatu This documen	Richard Abbate are of a member or an authorized representative of a member. In this executed in accordance with section 605.0203 (1) (b), Florida Statutes.
Signatu This documen I am aware th	Richard Abbate are of a member or an authorized representative of a member.
Signatu This documer I am aware th constitutes a t	Richard Abbate are of a member or an authorized representative of a member. In is executed in accordance with section 605.0203 (1) (b), Florida Statutes. In at any false information submitted in a document to the Department of State