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Dission of Corporations

From: Yanet Avila

4/10/23, 1:18 PM

## Florida Department of State

Division of Corporations

Electronic-Filing-Cover-Sheet—

Note: Please print this page and use it as a cover sheet. Type the fax audit number

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To:

Division of Corporations

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

Email Address:

APR 10 PH 3:3

## FLORIDA LIMITED LIABILITY CO. RME RENTALS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

SECRETARY US STATE

ARTICLE I F Name:	······································
The name of the Limited Liability Company is:	
RME Rentals, LLC	
(Must contain the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10411 SW 127 Ct.	10411 SW 127 Ct.
Miami, FL 33186	Miami, FL 33186
ARTICLE III - Registered Agent, Registered Office, & F The Limited Liability Company cannot serve as its own Reg	Registered Agent's Signature:
another business entity with an active Florida registration.)	
another business entity with an active Florida registration.)  The name and the Florida street address of the registered ago  Georgina Blanco, PA	ent are:

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..

Plorida street address (P.O. Box NOT acceptable)

Miami

City

FL

State

33173

Zip

Georgina Blanco
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 APR IO AM 9:30 SECRETARY DESTATE

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Page: 4 of 4

2023-04-10 17:20:24 GMT

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From:			

Tiele.		Name and Address.
<u>Title:</u>	" = Authorized Member	Name and Address:
	= Manager	
	-	
<u>MGR</u>	<del></del>	Carlos Encinas 10411 SW 127 Ct.
		Miami, FL 33186
		Middle B. B. Co
MCD		Word to Onided Cond.
MGR		Yamilet Caridad Sotolongo 10411 SW 127 Ct.
		Miami, FL 33186
		<u></u>
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(Use atta	achment if necessary)	
ADTICLE V. EC	Feeting date if other than the dat	e of filing: (OPTIONAL)
AKTICLE V. Ca	to is listed the data must be s	pecific and cannot be more than five business days prior to or 90 days af
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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)

\$ 5.00 Certificate of Status (Optional)

Carlos Encinas

CRETARY OF STA ALLAHASSEE, FI