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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

EXAMINIER'S INITIALS:____

Please use funds from this acco	unt: -I20210000160 \$125.00
Authorization Signature:	2 de la companya della companya della companya de la companya della companya dell
R & N Group 2, LLC	
Business Name	Doc. #
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Corp	Amendment
Not for Profit	Resignation of R.A. or
	Officer/Director
X Limited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
Other	Merger Merger
CORP	Conversion
LLLP	Amended and restated Articles
	Statement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE Country	Other

COVER LETTER

	ew Filing Section ivision of Corporations
sun IIVO	R & N Group 2, LLC
SUBJECT	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	irn all correspondence concerning this matter to the following:
	Brett Isaac
	Name of Person
	Firm/Company
	2151 University Blvd S
	Address
	Jacksonville, FL 32216
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call: Bresh IFaac 909, 730-9264)
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
los 125.0	00 Filing Fee

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

	contain the words "Limited	Liability Company,	'L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stro	eet address of the principal	office of the Limited	Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Addra	<u>:55:</u>
1902 Lane Ave S				
Jacksonville, FL	32210		 	
ARTICLE III - Registered (The Limited Liability Companother business entity with	pany cannot serve as its ow an active Florida registrati	n Registered Agent. You.)	t's Signature: 'ou must designate an ind	ividual or
The name and the Florida str	reet address of the registere	ed agent are:		
	Brett Isaac	Name		
		Name		
		vd S Jacksonville, FL ss (P.O. Box <u>NOT</u> ac		
	City	State	Zin	
laving been named as registe clace designated in this certific inther agree to comply with th im familiar with and accept th	cate, I hereby accept the ap we provisions of all statutes we obligations of my position	pointmeus as registere ejuting tiffthe proper	ed agent and agree to act is and complete performance is provided for in Chapter	this capacity. The state of my duties, and I
		(CONTINUED)		

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Nawras Nader
_	
AMBR	1902 Lane S Jacksonville, FL 32210
	34043014110.113 32210
,	
(Use attachment if necessary) EV: Effective date, if other than the	date of filing: 10/18/2023 (OPTIONAL)
E V: Effective date, if other than the ective date is listed, the date must be	date of filing: 10/18/2023 . (OPTIONAL) e specific and cannot be more than five business days prior to or 90
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ARTICLE IV-