# L25000061153

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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# Sunshine State Corporate Compliance Company

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

DATE 02/13/2025	<u> </u>	⇔WALK IN*
ENTITY NAME Raus	man Holding Co LLC	}
		<u> </u>
DOCUMENT NUMBEI	R	, ;
	**PLEASE FILE THE ATTACHED AND RETURN	y** 3
, 	Plain Copy	
XXXXXXXX	Certified Copy	
	Certificate of Status	
	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE  Certified Copy of Arts & Amendments  Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION	W**
COUNTRY OF DESTIN	ATION	
NUMBER OF CERTIFIC	CATES REQUESTED	
TOTAL OWED \$155.		120160000072
	5 K	8 F/W
Please call Tina at	the above number for any issues or concerns.	Thank you so much!

AR	TIC	LEI	Nar	ne:

The name of the Limited Linbility Company is:

Rausman Holding Co 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:

10503 Copper Lake Drive	10503 Copper Lake Drive
Boynton Beach, FL 33437	Boynton Beach, FL 33437
<u> </u>	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Sam Rausman		<u> </u>
	Name	
10503 Copper Lake	Drive	
Florida street addres	s (P.O. Box <u>NOT</u> ac	cceptable)
Boynton Beach	FL	33437
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..

/s/ Sam Rausman

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = A "MGR" = Ma	Authorized Member	
<u>MGR</u>	10503 Copper Lake Drive	
	Boynton Beach, FL 33437	
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<del></del>		
	<u> </u>	
(Use attachm	ent if necessary)	
If an effective date is the date of filing.) <u>Note:</u> If the date inse	re date, if other than the date of filing:	
ARTICLE VI: Other p	provisions, if any.	
promorn	SIGNATURE:	
REQUIRED		
	/s/ Sam Rausman	
	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 false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	
	Sam Rausman	
	Typed or printed name of signee	

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)