· L060000045368

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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COVER LETTER

· T	COVE	R LETTER	
TO: Registration Se Division of Co			7.35 P 1.
SUBJECT: Robo-C	Crete LLC.	223	
SUBJECT.	(Name of Limite	d Liability Company)	²⁵ p,
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	"MA
Michael Ro	bison		
4-1-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	(Name of Person)	
Robo-Crete	ELC.		
		(Firm/Company)	
8100 31S	T. AVE. N.		
ST. PETE	RSBURG, FL 337	(Address) 10 //State and Zip Code)	
For further information	concerning this matter, please	call:	
Michael Robison		at (727) 388-6824	
(Name	of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. FL 32301	

ARTICLE I - Name: The name of the Limited Lia	ability Company is:	MELLING ST
Robo-Crete LLC.		
(Must end with the words "Limited Li	iability Company, "Limited Company" or their abbreviation	n "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and stre	eet address of the principal office of the Limi	ted Liability Company is:
Principal Office Address:	Mailing Address:	
8100 31ST AVE. N.	8100 31ST AVE. N.	
St. Petersburg, FL 33710	St. Petersburg, FL 33710	
(The Limited Liability Company cann	Agent, Registered Office, & Registered A	
(The Limited Liability Company cambusiness entity with an active Florida	not serve as its own Registered Agent. You must designate a	
(The Limited Liability Company cambusiness entity with an active Florida	not serve as its own Registered Agent. You must designate a registration.) reet address of the registered agent are:	
(The Limited Liability Company came business entity with an active Florida The name and the Florida str	not serve as its own Registered Agent. You must designate a registration.) reet address of the registered agent are:	
(The Limited Liability Company cambusiness entity with an active Florida The name and the Florida str Michael I	not serve as its own Registered Agent. You must designate a registration.) reet address of the registered agent are: Robison	
(The Limited Liability Company cambusiness entity with an active Florida The name and the Florida str Michael I	not serve as its own Registered Agent. You must designate a registration.) reet address of the registered agent are: Robison Name	an individual or another
(The Limited Liability Company cambusiness entity with an active Florida The name and the Florida str Michael I	not serve as its own Registered Agent. You must designate a registration.) reet address of the registered agent are: Robison Name St. AVE. N. Florida street address (P.O. Box NOT acceptable)	an individual or another
(The Limited Liability Company cambusiness entity with an active Florida The name and the Florida str Michael I 8100 31	not serve as its own Registered Agent. You must designate a registration.) reet address of the registered agent are: Robison Name St. AVE. N. Florida street address (P.O. Box NOT acceptable)	an individual or another

(CONTINUED)
Page 1 of 2

Micha Poli ______
Registered Agent's Signature (REQUIRED)

Title:	Name and Address:	3.7
"MGR" = Manager		ं अंदि
"MGRM" = Managing Member	er たが,	
		4.77
MGRM		
	8100 31St. Ave. N.	
	St. Petersburg, Fl 33710	····
		
		
		·
		
(Use attachment if necessary)		
(Use attachment if necessary)		
LE V: Effective date, if other the	han the date of filing: May 1, 2006 (OI	
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LE V: Effective date, if other the factive date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Michael Signature of a	must be specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than five busing the specific and cannot be more than the specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be specific and cannot be specifically and cannot be spec	
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LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume)	must be specific and cannot be more than five busing the property of a member of an authorized representative of a member. The with section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury is stated herein are true.)	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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