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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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ALL AHASSEE, FLORES

TRANSMITTAL LETTER

Division of Corporations			
SUBJECT: ROWELL CONSULTING & CONTRACTING, L.L.C.			
(Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
RAYMOND G. FLORES CPA			
(Name of Person)	ALC:	8	
CG FLORES & RAY G FLORES, CPA	AH,	03 DEC 24	Garage Contract Contr
(Firm/Company)	200	24	*C±
809 BEVERLY PARKWAY	E, F	7	7
(Address)	L Of	7: 3:	
PENSACOLA FL 32505	LoRib	ယ	
(City/State and Zip Code)			
For further information concerning this matter, please call:			
RAY FLORESat (850435-6845			
(Name of Person) (Area Code & Daytime Telephone Numb	er)		

STREET ADDRESS:

TO:

Registration Section

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY FOR ROWELL CONSULTING & CONTRACTING, L.L.C.

ARTICLE I. Name

The name of the Limited Liability Company is ROWELL CONSULTING & CONTRACTING, L.L.C.

ARTICLE II. Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 6050 Arctic Street
Pensacola, Florida 32503

Mailing Address: 6050 Arctic Street Pensacola, Florida 32503



ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Raymond G. Flores 809 Beverly Parkway Pensacola, Florida 32505

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 property 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 608, F.S.

Registered Agent's Signature

Page 1 of 2

ARTICLE IV. Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> <u>Name and Address:</u>

Managing Member Kyle Rowell

6050 Arctic Street

Pensacola, Florida 32503

Member Theresa Rowell

6050 Arctic Street

Pensacola, Florida 32503

Member Raymond G. Flores

809 Beverly Parkway Pensacola, Florida 32505

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Raymond G. Flores, Member

Name of signee

Filing Fees:

\$100,00 Filing Fees for Articles of Org.

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Statue (Optional)