

W04000057322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

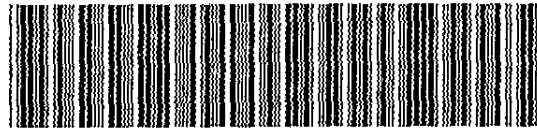
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

7/29

FLC

Office Use Only



800039620188

07/29/04--01043--016 **125.00

MJH

FILED

04 JUL 29 PM 1:38

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

OWENS, SCHINE & NICOLA, P.C.

ATTORNEYS AND COUNSELORS AT LAW

HOWARD T. OWENS (1926-1986)
EDWARD SCHINE (1926-1983)
ROBERT J. NICOLA
CAROLYN R. LINSEY †
ROBERT J. BERTA
DANIEL F. CARUSO
JOEL E. KANTER
STACEY D. LAFFERTY
JOHN M. SPIELMAN

OF COUNSEL
JOHN F. FALLON

† ALSO MEMBER GEORGIA AND NEW JERSEY BARS

799 SILVER LANE
P.O. BOX 753
TRUMBULL, CONNECTICUT 06611-0753

TELEPHONE (203) 375-0600
FACSIMILE (203) 375-5003
WEB SITE: OSN-PC.COM

FAIRFIELD OFFICE
53 SHERMAN STREET
FAIRFIELD, CONNECTICUT 06424

SENDER'S EXT. 3016

July 28, 2004

VIA FEDERAL EXPRESS

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

RE: Rodina, LLC

Dear Sir/Madam:

Enclosed are the Articles of Organization for the above-referenced limited liability company along with the filing fee of \$125. Please return all correspondence regarding this matter to my attention at the above address.

If you have any questions, please feel free to contact me.

Very truly yours,


Brenda D'Angelo
Legal Assistant

:bd
enclosures

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rodina, LLC

ARTICLE II - Address:

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

Principal Office Address:

5729 La Puerta Del Sol Boulevard

Unit 176, Building 13

St. Petersburg, FL 33715

Mailing Address:

5729 La Puerta Del Sol Boulevard

Unit 176, Building 13

St. Petersburg, FL 33715

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

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

Charles E. Sholtis

Name

5729 La Puerta Del Sol Boulevard, Unit 176, Bldg

Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg FLORIDA 33715

City, State, and 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 608, Florida Statutes.



Registered Agent's Signature

FILED
04 JUL 29 PM 1:38
STATE OF FLORIDA
TALLAHASSEE

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

<u>MGRM</u>	<u>Charles E. Sholtis</u> <u>5729 La Puerta Del Sol Boulevard</u> <u>Unit 176, Bldg 13</u> <u>St. Petersburg, FL 33715</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Charles E. Sholtis

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)