

L04000084159

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W 11/19/04

EFFECTIVE DATE  
11/11/04

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**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: ARMANDO RODRIGUEZ ROOFING, LLC

(Proposed company name - must include suffix)

Enclosed is an original and one (1) copy of the Limited Liability Company and a check for:

☐ \$125.00  
Filing fee & Designation  
of Registered Agent

☒ \$130.00  
Filing Fee, Designation of  
Registered Agent, &  
Certificate of Status

☐ \$160.00  
Filing Fee, Designation  
of Registered Agent,  
Certified Copy, &  
Certificate of Status

Please return all correspondence concerning this matter to the following:

ARMANDO RODRIGUEZ  
849 ORANGE AVENUE  
LONGWOOD, FL 32750

For Further information concerning this matter, please call: ARMANDO RODRIGUEZ at 407-595-7317.

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

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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ARTICLES OF ORGANIZATION

OF

ARMANDO RODRIGUEZ ROOFING, LLC

The undersigned subscribers to this limited liability company, natural persons competent to contract, hereby form a limited liability company under the laws of the State of Florida.

**ARTICLE I - NAME**

The name of the Limited Liability Company is: ARMANDO RODRIGUEZ ROOFING, LLC

**ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the Limited Liability Company is 849 ORANGE AVENUE, LONGWOOD, FL 32750.

**ARTICLE III - REGISTERED AGENT**

The registered agent of this company shall be:

NAME

ADDRESS

ARMANDO RODRIGUEZ

849 ORANGE AVENUE  
LONGWOOD, FL 32750

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, F.S.



ARMANDO RODRIGUEZ

EFFECTIVE DATE  
11/11/04

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**ARTICLE IV - MANAGEMENT**

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

<u>Title:</u>	<u>Name and Address:</u>
President:	ARMANDO RODRIGUEZ 849 ORANGE AVENUE LONGWOOD, FL 32750
Secretary:	ARMANDO RODRIGUEZ 849 ORANGE AVENUE LONGWOOD, FL 32750
Treasurer:	ARMANDO RODRIGUEZ 849 ORANGE AVENUE LONGWOOD, FL 32750

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**ARTICLE V - EFFECTIVE DATE**

The effective date of the Limited Liability Company is requested to be November 11, 2004.



\_\_\_\_\_  
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.)



Armando Rodriguez  
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)

IN WITNESS WHEREOF, We have hereunto set our hands and seals, acknowledged and filed the foregoing Limited Liability Company under the laws of the State of Florida this 11<sup>th</sup> day of November, 2004.

  
ARMANDO RODRIGUEZ

STATE OF FLORIDA     )  
                                  )  
COUNTY OF SEMINOLE    )

The foregoing instrument was acknowledged before me this 11<sup>th</sup> day of November, 2004 by ARMANDO RODRIGUEZ, who is personally known to me or who has produced driver's license as identification and who did take an oath.  
FLDL R 362-000-77-059-0



  
Notary Public, State of Florida  
At Large

My Commission Expires:

Having been named as Registered Agent and to accept Service of Process for the above-stated company at the place designated herein, 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.

  
ARMANDO RODRIGUEZ

DATE: 11-11-04

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TALLAHASSEE, FLORIDA