05000013923

Mowrey & Biggins, P.A. 515 North Adams Street Tallahassee, Florida 32301	400045752
(Address)	100010702
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name) (Document Number)	HASSES.FL
Certified Copies Certificates of Status	
	. 02/07/0501091004
Special Instructions to Filing Officer:	
	120

Office Use Only



504

**125.00

ARTICLES OF ORGANIZATION OF LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is: RoBe, LLC		
ARTICLE II - Address:		
The mailing address and street address of the principal office of the Limited Liab	oility Company	
is: 515 North Adams Street, Tallahassee, Florida, 32301		
ARTICLE III - Registered Agent, Registered Office, Registered Agent's Signature:		
The name of the registered agent and the Florida street address of the registered a	agent are:	
Ronald A. Mowrey		
Name		
515 North Adams Street		
Florida Street Address (P.O. Box NOT acceptable)		
Tallahassee, Florida, 32301 City, State and Zip Code		
City, State and Zip Code		
Having been named as registered agent and to accept service of process for the above stated	Himitad	
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 s	tatutes 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.	v	
(Trought G /ML)		
Registered Agent's Signature		
ARTICLE IV - Management (Check box if applicable.)		
☐ The Limited Liability Company is to be managed by one manager or more manager	gers and is,	
therefore a manager - managed company. (An additional article must be added if	an effective	
date is requested)		
$\frac{1}{2}$		
1 th 1/1/11 /		
Signature of a member or an authorized representative of a member.	d	
	$\Xi_{\underline{\alpha}} \cong \Xi$	
(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.)	SE Commen	
75. 11 A.F	SER 7	
Ronald A. Mowrey		
Typed or Printed Name of Signee	() The care	
	3F = ''	

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)

9