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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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J. BRYAN APR 1 1 2006

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: RUBEN'S ROOFING & GENERAL REPAIRS LLC (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:	
RUBEN D. BELL	
BELL'S ROOFING & GENERAL REPAIRS LLC	1 = 1
RUBEN D. BELL (Name of Person) BELL'S ROOFING & GENERAL REPAIRS LLC (Firm/Company) 470 N. W. 30th AVENUE (Address)	0
FORT LAUDERDALE, FLORIDA 33311-8430 (City/State and Zip Code)	
For further information concerning this matter, please call:	
ANGELA BELL-SANCTIOUS at 954 778-5195 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times 130.00 Filing Fee & \$\times \$155.00 Filing Fee & Certificate of Status \$\times \$\text{Certified Copy}\$ (additional copy is enclosed) \$\times \$\text{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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BELL'S ROOFING & GENERAL REPAIRS LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

470 N. W. 30th AVENUE

FORT LAUDERDALE, FLORIDA 33311-8430

470 N. W. 30th AVENUE

FORT LAUDERDALE, FLORIDA 33311-8430

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ANGELA BELL-SANCTIOUS

Name

1804 N. W. 58TH AVENUE

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

LAUDERHILL,

FL 33313-4023

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, F.S..

stered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u>	Name and Address:
"MGR" = Manager	Transcription of the state of t
"MGRM" = Managing Member	
MGR	RUBEN D. BELL
	470 N. W. 30th AVENUE
	FORT LAUDERDALE, FLORIDA 33311-8430
MGRM	ANGELA S. BELL
	470 N. W. 30th AVENUE
	FORT LAUDERDALE, FLORIDA 33311-8430
Use attachment if necessary)	
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fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document const.	e specific and cannot be more than five business date of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury
fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with secondary)	e specific and cannot be more than five business date of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury

Filing Fees:

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