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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	<u></u> -
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Office Use Only



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SECRETARY OF STATE

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## **COVER LETTER**

TO:	Registration Section Division of Corporations	<u>==</u>		·
CIID II	ECT: Rosselle Real Estate Gr	auc		
SUDJE		ed Liability Company)		• • • • • • • • • • • • • • • • • • •
The en	closed Articles of Organization and fee(s) are	submitted for filing.		
Please	return all correspondence concerning this mat	ter to the following:		
	William T. Rosselle III			
	<del>,</del>	(Name of Person)		
	Rosselle Real Estate Grou	р		
		(Firm/Company)	Āro ~	20 m 通子 20mm
	1967 NW Marsh Rabbit L	ane	SECR VLLA	$\neg$
		(Address)	AUG I	
	Jensen Beach, Fl. 34957			m
	(Či	y/State and Zip Code)	FLOTA STS W	O
For fur	ther information concerning this matter, please	e call:		· · · · · · · · · · · · · · · · · · ·
Willia	am T Rosselle III	at ( 772 ) 631-960		
	(Name of Person)	(Area Code & Daytime To	elephone Number)	हैं है हिंद
Enclos	sed is a check for the following amount:			
<b>X</b> j \$125	5.00 Filing Fee  \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Star Certified Copy (additional copy is er	tus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Addres Registration Section Division of Corporatio Clifton Building	<del>-</del> , -, -, -,	e e

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company	is:	-	
Rosselle Real Estate Group LLC,			
(Must end with the words "Limited Liability Company, "Li	imited Company" or their abbreviation	on "LLC," or "L.C.,")	<u> </u>
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Lim	iited Liability Co	mpany is:
Principal Office Address:	Mailing Address:	<del></del> .	£ **
1967 NW Marsh Rabbit Lane Jensen Beach, Fl. 34957			· · · · · · · · · · · · · · · · · · ·
1947 NW Mas Florida street Jensen Beach	legistered Agent. You must designate he registered agent are:	AMETARY OF STATE ACHASSEE, FLORIDA	

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..

Registered Agent's Signature (REOLIRED)

(CONTINUED)
Page 1 of 2

Title:	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Member	, <u>.</u>		٠.
MGR	William T. Rosselle III		-
WOR	1967 NW Marsh Rabbit La		
	· · · · · · · · · · · · · · · · · · ·		
	Jensen Beach, Fl. 34957		•
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(Use attachment if necessary)			
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LE V: Effective date, if other than the	date of filing: 7/1/00	OPTIO	NYAT
ffective date is listed, the date must be	e specific and cannot be mor	a than five husiness	
days after the date of filing.)	specific and campot be mor	c than nvc business (	iays
• · · · · · · · · · · · · · · · · · · ·			
REQUIRED SIGNATURE:			
/ 4.4	. 0	A	
Lie	lin Rossel	le	
Signature of a membe	er or an authorized representative	e of a member.	-
(In accordance with sec	r or an authorized representative ction 608.408(3), Florida Statutes, itutes an affirmation under the pens	the execution	

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)

William T. Rosselle III

Typed or printed name of signee