

W06000120651

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000298053 3)))



H0600029805333ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
Fax Number : (516)935-3088

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Roby Masonry, L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED
06 DEC 19 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2006 DEC 19 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W06-120651
[Signature]

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Roby Masonry, L.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:550 Phoebe Road550 Phoebe RoadQuincy, FL 32351Quincy, FL 32351

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

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

Hershel Roby

Name

550 Phoebe Road(P.O. Box or Mail Drop Box NOT Acceptable)Quincy, FL 32351

(City / State / 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.

Hershel Roby
Registered Agent's Signature - Hershel Roby

FILED
 2006 DEC 19 AM 9:15
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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


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

Title:**Name and Address:**

- "MGR" = Manager
- "MGRM" = Managing Member

MGR**Hershel Roby- 550 Phoebe Road, Quincy, FL 32351**

(Use attachment if necessary)

REQUIRED SIGNATURE:


 Signature of a member or 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.)

Hershel Roby

Typed or printed name of signee

 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

2006 DEC 19 AM 9:15

FILED