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SECRETARY OF STALE DIVISION OF CORPORALIONS

OF JUN 18 PM 1: 27

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Angel Roc, LLC (Name of Limited Liability Company)		
(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:		
Nancy C. Navarra (Name of Person)		-
(Name of Person)		
		_
(Firm/Company)		
7435 SW 170th Terrace (Address) Palmetto Bay, FL 33157 (City/State and Zip Code)	07	SIAID 3S
(Address)	MUL	150 E
Palmetto Bay, FL 33157	8) 1317 1317
(City/State and Zip Code)	07 JUN 18 PH 1:27	RPGR SPGR
For further information concerning this matter, please call:		CORPORATIONS
Nancy Navarra at (305) 439-2624 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	ıs &	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building		

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
and the same of the same same same same same same same sam	•
Angel Roc, LLC	
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7435 SW 170th Terrace	7435 SW 170 Terrace Palmetto Bay, FL 33157
Parmetto Bay, Pl 33151	<u> </u>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
	egistered agent are:
The name and the Florida street address of the r	- Total
Mancy /	avarra 27 ATE
7435 5	iw 170th Terrace
	Iress (P.O. Box <u>NOT</u> acceptable)
Palmetto	Pay 33157
City, State, a	and Zip
Uming been nowed as registered again and to	account complete of myceografics the above stated limited

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 (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:**

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.)

Nancy Navarra

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)