

05/16/08 13:14:58

Broad and Cassel->

850-617-6383

Page 1 of 1

Division of Corporations

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Page 1 of 1

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BROAD AND CASSEL-TAMPA

Account Number : I20080000032

Phone : (813) 225-3028

Fax Number : (813) 204-2130

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

R&L Romera, LLC

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Page Count	03
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100 NORTH TAMPA STREET
SUITE 3500
TAMPA, FLORIDA 33602
P.O. BOX 3310 (33601-3310)
TELEPHONE: 813.225.3020
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www.broadandcassel.com

TELECOPIER TRANSMITTAL

DATE: Friday, May 16, 2008 1:13:48 PM
TO: New Filing Section
ADDRESS: Florida Division of Corporations
TELECOPIER PHONE NO.: 1-850-617-6383
CONFIRMATION PHONE NO.: 1-850-245-6051
FROM: Margaret Weaver
TOTAL NUMBER OF PAGES: 05 (including cover)
CLIENT AND MATTER: 41508-0001

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MESSAGE:

H08000131331 3

Please file the attached Articles of Organization for R&L Romera, LLC.

PLEASE NOTIFY US IMMEDIATELY IF ALL PAGES WERE NOT RECEIVED AT 813.225.3020

FAX OPERATOR: _____ FIRST ATTEMPT: _____ SECOND ATTEMPT: _____

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H08000131331 3

COVER LETTER

TO: Registration Section
Division of CorporationsSUBJECT: R&L ROMERA, 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:

Mark Barber, Esquire

(Name of Person)

Broad and Cassel

(Firm/Company)

100 N. Tampa Street, Suite 3500

(Address)

Tampa, FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Margaret Weaver, Paralegal at (813) 225-3022

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing AddressRegistration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314Street/Courier AddressRegistration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301FILED
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TALLAHASSEE FLORIDA

H08000131331 3

H08000131331 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

R&L Romera, LLC

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

ARTICLE II - Address:

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

Principal Office Address:9035 Hogans Bend
Tampa, FL 33647**Mailing Address:**9035 Hogans Bend
Tampa, FL 33647**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:

Mark M. Barber, Esquire

Name

100 N. Tampa Street, Suite 3500Florida street address (P.O. Box **NOT** acceptable)Tampa, FL 33602

FL

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H08000131331 3

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H08000131331 3

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Robert Romera

9035 Hogans Bend

Tampa, FL 33647

MGRM

Lorraine Romera

9035 Hogans Bend

Tampa, FL 33647

(Use attachment if necessary)

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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.)

Michael D. Magidson

Typed or printed name of signer

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)

H08000131331 3