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(Requestor's Name)
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PICK-UP WAIT MAIL
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**EXAMINER** 

# **COVER LETTER**

· TO:

**Registration Section** 

Division of C	Corporations			
SUBJECT:	Roman	ello Renovations LLC.		
	Name of Limi	ted Liability Company		_
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	Do	uglas Romanello		<del></del>
		Name of Person		
	Romane	ello Renovations LLC.		
		Firm/Company		
	44	11 Tevalo Drive		
		Address	₹s	20
	Va	alrico, FL 33596	LEGR.	2009 JUN 29
		ty/State and Zip Code	PS I	2 2
	DRom	anello1@Verizon.net	SE C	
	E-mail address: (to be used	for future annual report notification)	FS	<b>3</b> 4
For further information	n concerning this matter, pleas	se call:	ORIDA ORIDA	1: 00
	as Romanello		661-9181	
Name	e of Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a check t	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 Certificate of S Certified Copy	
		•	(additional copy is	enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	i	
	Division of Corporations P.O. Box 6327	Division of Corporation Clifton Building	ns	

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 Compa	ny is:				
Romanello Renovations LLC.					
(Must end with the words "Limite	d Liability Company," "L.L.C.," or "LLC."	)			
ARTICLE II - Address:					
The mailing address and street address of	the principal office of the Limite	d Liability Company is:			
Principal Office Address:	Mailing Address:				
4411 Tevalo Drive	4411 Tevalo Drive				
Valrico, FL 33596	Vatrico, FL 33596				
4411 Florida street addres Valrico, FL 3359	f the registered agent are:  nthony Romanello Name  Tevalo Drive s (P.O. Box NOT acceptable)				
City, S	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

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	Douglas Romanello 4411 Tevalo Drive Valrico, FL 33596
(Use attachment if necessary)  ARTICLE V: Effective date, if other the	
If an effective date is listed, the date no or 90 days after the date of filing.)  REQUIRED SIGNATURE:	nust be specific and cannot be more than five business days prior
Signature of p	member or an authorized representative of a member.
of this docume	with section 608.408(3), Florida Statutes, the execution nt constitutes an affirmation under the penalties of perjury ated herein are true.)
Filing Fees:	Douglas A. Romanello Typed or printed name of signee

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

\$ 5.00 Certificate of Status (Optional)