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(R	Requestor's Name)	
(A	ddress)	· ***
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(C	city/State/Zip/Phone	#)
PICK-UP	WAIT -	MAIL
(В	dusiness Entity Name	e)
(D	Occument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON
JUL 87 2010
EXAMINER

COVER LETTER

TO: Registration Division of C			. ,
SUBJECT:	ROLQUIN Name of Limite	Dancesport de Liability Company	Marketing, L
The enclosed Articles	of Organization and fee(s) are s		
Please return all corres	pondence concerning this matte	er to the following:	
	Debra	Rolquin Name of Person	
	Stevens & A		ertising
		ohatehee a	
		FL 34110 //State and Zip Code Of Qol. Comport future annual report notification	
For further information	concerning this matter, please	·	ı)
	ROLOVIN of Person		77-0791 Celephone Number
Enclosed is a check f	or 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 Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addra Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
ROLQUIN DANCESPOR	
ARTICLE II - Address: The mailing address and street address of the principal of	ffice of the Limited Liability Company is:
Principal Office Address: 400, Cocohatchee Blvd. Naples, FC 34110	g Address:
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own Registered Agent. business entity with an active Florida registration.)	& Registered Agent's Signature: You must designate an individual or another
The name and the Florida street address of the registered Stevens & Associ Name 400 Cocohatchele Florida street address (P.O. Naples FL City, State, and Zip	blvd Box NOT acceptable)
Having been named as registered agent and to accept ser liability company at the place designated in this certific registered agent and agree to act in this capacity. I furthe statutes relating to the proper and complete performance accept the obligations of my position as registered age	cate, I hereby accept the appointment as er agree to comply with the provisions of all e of my duties, and I am familiar with and
Registered Agent's Signature (REQU	SECRETARY NISION OF C
(CONTINUED) Page 1 of 2	ORPORATIO: 0

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 Debra Rolguin (Use attachment if necessary) . (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (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.)

Debra Rolquin

Typed or printed name of signee

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	•
ROLQUIN DANCESPORT MARK	CETING, 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 Limite	ed Liability Company is:
Principal Office Address: Mailing Address:	
400 Cocohatchee Blvd. same Naples Fr. 34110	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent. You must designate an business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	_
Stevens & Associates Adv	rertising
Name	J
400 Cocohatchee Blvd	
Florida street address (P.O. Box NOT acceptable	e)
Naples FL 34110 City, State, and Zip	
City, State, and Zip	
Having been named as registered agent and to accept service of process for liability company at the place designated in this certificate, I hereby accept agent and agree to get in this capacity. I further agree to comply	ept the appointment as
registered agent and agree to act in this capacity. I further agree to comply statutes relating to the proper and complete performance of my duties, and	
accept the obligations of my position as registered agent as provided for	
Delug R. Steven	ECRETA ISION OF
Registered Agent's Signature (REQUIRED)	FILEI ARY CON F CON
(CONTINUED)	RP S
Page 1 of 2	STATI ORATI 10: 0:

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" = Mar	nager	Name and Address:	
	lanaging Member		
MER		Debra Rolquin	
			
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			,, <u>,</u>
			
	nt if necessary) ve date, if other than the	e date of filing: (O	PTIO
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)	e date of filing: (O	PTIOI iness (
E V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:	e date of filing: (One specific and cannot be more than five bus The specific and cannot be more than five bus	PTIO
E V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const that the facts stated he	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury trein are true.)	
E V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const that the facts stated he	er or an authorized representative of a member. action 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.)	אַנס
E V: Effective date is lays after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document const that the facts stated he	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.)	SIAIG
E V: Effective date is days after the	Signature of a member of this document const that the facts stated he	er or an authorized representative of a member. Action 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury trein are true.) Albra Rolguin Apped or printed name of signee	DIVISION
EV: Effective date is days after the REQUIRED S	Signature of a member of this document construct that the facts stated he	er or an authorized representative of a member. action 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury arein are true.) Abra Rolguin Apped or printed name of signee	DIVISION OF CC
EV: Effective date is days after the REQUIRED S Filing Fe \$125.00 Filing of R	Signature of a member of this document construct that the facts stated he	er or an authorized representative of a member. Action 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury trein are true.) Albra Rolguin Apped or printed name of signee	DIVISION OF CORP