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Certified Copies	_ Certificates	s of Status
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C. LEWIS

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EXAMINER

CÖVER LETTEŘ

TO: Registration S Division of Co	Section Orporations	<i>∞</i>	
SUBJECT: ROG G	rillers, LLC		
		ed Liability Company	
The enclosed Articles o	f Organization and fec(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	ter to the following:	
Frederic Byda	a, Jr.		
		Name of Person	
ROG Grillers,	LLC		
		Firm/Company	
2801 North Ta	ampa Street		
		Address	
Tampa, FL 33	3602		
	Cit	y/State and Zip Code	
fbyda@aol.co		for future annual report notification)	
For further information	concerning this matter, please	•	
Frederic Byda, Jr.		at (813)629-2620	
Name of Person		Area Code & Daytime Telep	hone Number
Enclosed is a check for	or the following amount:		
☑\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	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 Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ROG Grillers, LLC		
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
2801 North Tampa Street	2801 North Tampa Street	
Tampa, FL 33602	Tampa, FL 33602	
The name and the Florida street address Frederic Byda, Jr. 2801 North Tampa	Name	TILEL PHE
_	·	REAL OF
Tampa	FL 33602 City, State, and Zip	7
liability company at the place designed registered agent and agree to act in this statutes relating to the proper and compared to the place designed	and to accept service of process for the cated in this certificate, I hereby accept the capacity. I further agree to comply with aplete performance of my duties, and I ame as registered agent as provided for in Cl	e appointment as the provisions of all I familiar with and

(CONTINUED)
Page 1 of 2

FILED

<u>Title:</u> "MGR" = Manager "MGRM" = Managi	Name and Address: TABLEAHAS	SEEJF
MGRM	Frederic Byda, Jr	
	3607 Ohio Avenue	
	Tampa, FL 33611	
MGR	Albert C. Beckman	
	109 1/2 Gladys Avenue East	
	Tampa, FL 33602	
	Court D. Bridge	
MGR	Scott D. Burkett 4705 Pearl Avenue	
	4703 Pearl Avenue Tampa, FL 33611	
	Tampa, r C 33011	
LE V: Effective date Tective date is listed	e, if other than the date of filing: (the date must be specific and cannot be more than five bu	
fective date is listed days after the date REQUIRED SIGN	e, if other than the date of filing: (the date must be specific and cannot be more than five but of filing.) ATURE:	
LE V: Effective date fective date days after the date REQUIRED SIGN	e, if other than the date of filing: (the date must be specific and cannot be more than five but of filing.)	
LE V: Effective date fective date days after the date REQUIRED SIGN Signal (In of	e, if other than the date of filing: (the date must be specific and cannot be more than five but of filing.) ATURE:	
LE V: Effective date fective date days after the date REQUIRED SIGN Signature of the date of the date days after the date signature of the date of the days after the date signature of the days after th	the date must be specific and cannot be more than five but of filing.) ATURE: gnature of a member or an authorized representative of a member. accordance with section 608.408(3), Florida Statutes, the execution this document constitutes an affirmation under the penalties of perjury	

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)