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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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D. BRUCE

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EXAMINER

COVER LETTER

| TO: | Registration Section Division of Corporations | | | | |
|----------|---|---|--|--|---|
| SUBJI | ECT: ROSS USA, LLC | | | | |
| | Name of Limit | ited Liability Comp | pany | | |
| The en | aclosed Articles of Organization and fee(s) are | submitted for filir | ng. | | |
| Please | return all correspondence concerning this ma | tter to the followin | eg: | | |
| | Dave Ross Jr | | | | |
| | | Name of Person | | | |
| | Ross USA, LLC | | | | |
| | | Firm/Company | | | |
| | 1835 Minutemen Cswy | 4 | | | |
| | | Address | | <u> </u> | |
| | COCOA BEACH, FL 32931- | 2072 | | LA. | Y |
| | | ity/State and Zip Coo | de | 7 - 8 A - 8 A S S S A | - |
| | dave@rossusallc.com E-mail address: (to be used | for future appual rec | aget notification) | <u>m</u> ≺ | 7 |
| For fu | ther information concerning this matter, pleas | • | on nomeanon) | of STATE | - |
| Dav | e Ross Jr | _ _{at (} 321 | , 230-6999 | DM O | |
| | Name of Person | | le & Daytime Telephone Numb | ber | |
| Enclo | sed is a check for the following amount: | | | | |
| \$125.00 | O Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status | \$155.00 Fili Certified Co (additional co | opy Certifica py is enclosed) Certified | Filing Fee, ate of Status & d Copy al copy is enclosed) | |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 | Registra Division | Courier Address tion Section of Corporations Building | | |

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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|-----|------|--------|--------|-----|
| AR | | י גיונ | - : 12 | me: |

The name of the Limited Liability Company is:

ROSS USA. 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:

Mailing Address:

1835 Minutemen Cswy #304

Cocoa Beach, FL 32931

1835 Minutemen Cswy #304 Cocoa Beach, FL 32931-2072

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:

DAVID K ROSS JR

Name

1835 Minutemen Cswy #304

Florida street address (P.O. Box NOT acceptable)

COCOA BEACH

., 32931

City, State, and Zip

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ALL VARIAGES OF STATE

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 (REOUIRED)

(CONTINUED)

Page 1 of 2



| <u>Title:</u> | Name and A | ess: |
|---|---|--|
| "MGR" = Manager | | |
| "MGRM" = Managing Member | | |
| MGR | David Ross Jr | |
| | 1835 Minuterr | swy #304 |
| | Cocoa Beach | 2931 |
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