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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

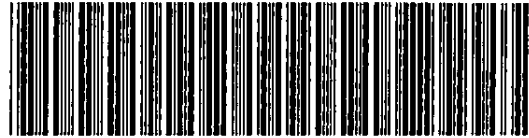
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC 11 2012

EXAMINER

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rocco's Tailor Shop, LLC
Name of Limited Liability Company

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TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rocco Laguardi
Name of Person

Firm/Company

5600 Tamiami Trail North #20
Address

Naples, FL 34108
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rocco Laguardi at (239) 514-0992
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 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 Circle
Tallahassee, FL 32301

REGISTRATION SECTION

DIVISION OF CORPORATIONS

Please release the name Rocco's Tailor Shop, LLC to be reused.

Rocco Laquaniti

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

ROCCO'S TAILOR SHOP, L.L.C.

ARTICLE II - ADDRESS

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

Principal Office Address:

5600 TAMIAMI TRAIL NORTH #10

NAPLES, FL 34108

Mailing Address:

5600 TAMIAMI TRAIL NORTH #10

NAPLES, FL 34108

**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)

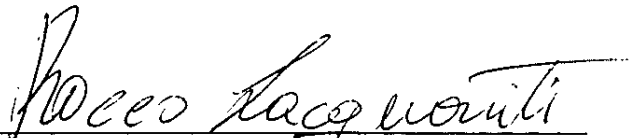
The name and the Florida street address of the registered agent are:

ROCCO LACQUANITI

5600 TAMIAMI TRAIL NORTH #10

NAPLES, FL 34108

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 positions as registered agent as provided for in Chapter 608, F.S..


Registered Agent's Signature

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TALLAHASSEE, FLORIDA

ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S):

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TALLAHASSEE, FLORIDA

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

ROCCO LACQUANITI
5600 TAMiami TR N #10
NAPLES, FL 34108

**ARTICLE V - EFFECTIVE DATE, IF OTHER THAN 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.)

ROCCO LACQUANITI

Typed or printed name of signee