140000034645

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nan	ne)
(Ďo	ocument Number)	·
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



600256433336

02/10/14--01040--001 **160.00

SECRETARY OF STATE OF STORY OF CORPORATIONS

9/19

COVER LETTER

TO:	Registration Division of C	Section Corporations		
SUBJE	ECT: <u>ROSSE</u>	R I I C		
	3011 33000		nited Liability Company	
		of Organization and fee(s) ar	· ·	
	ARTHUR	R L. WALTERS	Name of Person	
	TRANS A	AMERICAN RESEARCH A	ND DEVELOPMENT CORPO Firm/Company	DRATION
	950 HIGI	HWAY 98 EAST, UNIT 600	Address	
	DESTIN.	FLORIDA 32541	ity/State and Zip Code	
<u>.a</u> t	w.etal@verizo	n.net E-mail address: (to be used	d for future annual report notifica	ition)
For fur	ther information	n concerning this matter, plea	ise call:	
ARTH	IUR L. WALTE Nan	ERS at (at (lephone Number
Enclos	ed is a check fo	or the following amount:		
□ \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	•
ROSSER LLC (Must and with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	
Principal Office Address:	Mailing Address:
950 HIGHWAY 98 EAST UNIT 6061	950 HIGHWAY 98 EAST UNIT 6061
DESTIN, FLORIDA 32541	DESTIN, FLORIDA 32541
another business entity with an active Florida registration. The name and the Florida street address of the registered a ARTHUR L. WALTERS Name	
950 HIGHWAY 98 EAST, UNIT Florida street address (P.O. Box I	
DESTIN	FL 32541
City	Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r. 605, F.S

(CONTINUED)

Page 1 of 2

Title:	Name and Addre	ess:
"AMBR" = Authorized Me	mber	
"MGR" = Manager MGR	TRANS AMERICAN RESEAR	CH AND DEVELOPMENT CORPORAT
		NIT 6061
	-	
	·	
		
		
(Use attachment if necessar	у)	
LEV: Effective date, if other	than the date of filing:	(OPTIONAL)
fective date is listed, the dat of filing.)	e must be specific and cannot be more t	than five business days prior to or 90 da

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Arthur L. Walters, <u>President, Trans American Research And Development Corporation</u>, Sole Manager 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)

REQUIRED SIGNATURE:

Page 2 of 2