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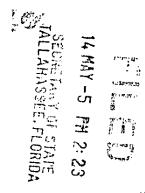
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J. Shivers WAY 12 2014



May 1, 2014

ANNABELLE ROJAS 9875 SW 62 ST MIAMI, FL 33173

SUBJECT: THE ROJAS GROUP, LLC

Ref. Number: W14000027466

We have received your document for THE ROJAS GROUP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 614A00009295

^j.*.-

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJE	ECT: The Rojas Group, LLC Name of Lim	ited Liability Company	
The en	closed Articles of Organization and fee(s) are	e submitted for filing.	
Please	return all correspondence concerning this ma	atter to the following:	
	Annabelle C. Rojas	Name of Person	
	The Rojas Group, LLC	Firm/Company	
	9875 SW 62 Street	Address	
	Miami, Florida 33173 . Ci	ty/State and Zip Code	
_ac	crojas@bellsouth.net E-mail address: (to be used	for future annual report notification)	
For fur	ther information concerning this matter, pleas	se call:	
Annab	oelle C. Rojas at (_3 Name of Person	Area Code Daytime Telephone Num	be r
	ed is a check for the following amount: 00 Filing Fee \$\sum \frac{1}{3} \text{30.00 Filing Fee & Certificate of Status}	Certified Copy Certification (additional copy is enclosed) Certified	Filing Fee, ate of Status & I Copy 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	

Allgoo Annabelle C. Rojas 1 A ...

Page 2 0/3

		0	U
ARTICLESOFO	RGANIZATION FOR FLOI	IDA LIMITED LIABILITY CON	
ARTICLE I-Name: The name of the Limited Liability (Annabella Rojas, LLC	Company is:		
BA The Poice Group Het-C			
(Must end wit	th the words "Limited List	ility Company, "L.L.C.," or "I	LC.")
ARTICLE II - Address: The malling address and street address	ress of the principal office	of the Limited Liability Comp	any is:
Principal Office Address:		Iailing Address;	
9875 SW 62 Street	. 9	875 SW 62 Street	
Miami, FL 33173		flami, Ft. 33173	
			
(The Limited Liability Company ca another business entity with an act The name and the Florida street add	ive Florida registration.) dress of the registered aga		nate an individual or
elledannA	C. Rojas Name		
	144016		
9875 SW			
Florida atr	ect address (P.O. Box <u>NC</u>	T acceptable)	
_Mlami		FL 33173	
	City	Zip	
Having been named as registered a the place designated in this cert capacity. I further agree to comp. of my duties, and I am familiar we Reg	ificate, I hereby accept the ly with the provisions of al	appointment as registered ages statutes relating to the proper ons of my position as registered 15, F.S.	nt and agree to act in this and complete performance
	(CONTINUED)		
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Page 1 of Z

14 MAY -5 PM 2: 23
SECILE DALKY OF STATE
TALLAMASSEE, FLORIDA

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MOR" = Manager MGR Annabella C. Rolas 9876 SW 62 Street Mlami, Florida 33173 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: July 1, 2014 (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.) ARTICLE VI: Other provisions, if any. **REOUIRED SIGNATURE:** 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 \$.817.155, F.S.) Annabelia C. Rojas Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S' 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2