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Effective Date 12/20/14

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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JANOT 2015 J. HARRIS

## **COVER LETTER**

TO:	Registration Division of	n Section Corporations		
SUBJI	ECT: Charle	s Roland Roofing LLC Name of Lii	mited Liability Company	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	espondence concerning this m	natter to the following:	
	Charles	M. Roland	Name of Person	
			Name of Person	
	Charles	Roland Roofing LLC		
			Firm/Company	
	10201 V	Vest Beaver Street Lot 82		
			Address	
	lackeon	ville Florida 32220	•	
	<u>JACKSOII</u>	VIIIE 1 10/100 32220	City/State and Zip Code	
	crolan		d for future annual report notification	ation)
For fur	ther informatio	on concerning this matter, ple	ase call:	
Charle	es Roland Nar	at (at (at (at (at (at (	904 ) 207-5531 Area Code Daytime Te	lephone Number
Enclose	ed is a check fo	or the following amount:	· · · · · · · · · · · · · · · · · · ·	
<b>I</b> \$125.0	0 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)
		iling Address	Street/Courier Add	ress

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



December 9, 2014

CHARLES M ROLAND 10201 WEST BEAVER STREET LOT 82 JACKSONVILLE, FL 32220

SUBJECT: CHARLES ROLAND ROOFING LLC

Ref. Number: W14000073405

We have received your document for CHARLES ROLAND ROOFING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

Letter Number: 014A00025989

2014 NOV 25 PM 1: 32
SECRETARY OF STATE

## Effective Date 12/20114

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Charles Roland Roofing LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal of	fice of the Limited Liability Company is:
	,,
Principal Office Address:	Mailing Address:
10201 West Beaver Street	10201 West Beaver Street
Lot 82	Lot 82
Jacksonville Florida 32220	Jacksonville Florida 32220
ARTICLE III - Registered Agent, Registered Office, &	2. Dagintared Amont's Signature.
(The Limited Liability Company cannot serve as its own F	
another business entity with an active Florida registration	
The control of the Till the second of the til	
The name and the Florida street address of the registered	
L Dou	a Vansant
Name	g Vansant 1201 West Beaver Street Lot 82
. 10	1201 West Beaver Street Lot 82
Florida street address (P.O. Box	NOT accentable)
<u>Jacksonville</u>	FL 32220
City	Zip
Having been named as registered agent and to accept ser	vice 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 o	f all statutes relating to the proper and complete performance
	igations of my position as registered agent as provided for in er 605, F.S
	7 000, 1
Michael Jan	Night !
70 9 7000	(DEOLUDED)
Registered Agent's Signatu	ine (kedoiked)
(CONTINUE	(n)

Page 1 of 2

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, ,	ARTICLE IV- The name and address of each person authorized to		to manage and control the Limited Liability Company:		
	Title: "AMBR" = Authorized M "MGR" = Manager MGR	-	Name and Address:  Charles Roland 10201 West Beaver Street Jacksonville Florida 32220		
	and the selection of a	na an ann an			<del></del>
If an ef he date	(Use attachment if necessal (Use attachment if necessal (Use V: Effective date, if other fective date is listed, the date of filing.)  LE VI: Other provisions, if	er than the date of filing: ate must be specific and	17/20/2014 I cannot be more than five bus		or 90 days afte
	(In accordance	nature of a member or with section 605.0203 (1	an authorized representative ) (b), Florida Statutes, the exec	ution of this docume	
	I am aware that constitutes a thi	any false information surd degree felony as prov	alties of perjury that the facts st bmitted in a document to the D ided for in s.817.155, F.S.)  preprinted 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)

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