Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone

: (305)552-5973

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Email	Address:	
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FLORIDA LIMITED LIABILITY CO. ROMAFL LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

ATTENTION: TAMMY HAMPTON

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Corporate Filing Menu

JAN 1 6 2015

T. HAMPTON

Help

H15000012200

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: (Must end with the words "Limited Liability Comp	nami
"Li.C.," or "LIC.")	Aug,
ROMAFL LLC	
ARTICLE II - Address:	.:12±
The mailing address and street address of the principal office of the Limited Liab Company is:	ınty
Company is: 11917 Sw 110 St. Circle E	
Miami Fl. 33186	
ARTICLE III - Registered Agent, Registered Office:	
The name and the Florida street address of the registered agent are: (The Limited Li Company cannot serve as its own Registered Agent. You must designate an individual or another busines	iability s entity
with an active Florida registration.)	-
Mary Luz Sanchez	
11917 SW 110 ST Circle E	
Miami FL 33186	
A DOMENT IN THE	
ARTICLE IV- The name and title of each person authorized to manage and control the Limited	
Liability Company:	
Christian Espinosz - Marm	
Hary luz Szinchez - Marm	
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ASSET OF LOCAL PROPERTY OF LOC	5 JAN 15 PH
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Required Signatures:

* 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.

Typed or printed name of signee

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 605, F.S..

Registered Agent's Signature (REQUIRED)

15 JAN 15 PH 2: 14
SECRETARY OF STATE
TALLAHASSEE, FLORID

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