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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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02/02/15--01039--002 **155.00



FEB 1 1 2015 S. YOUNG

EFFECTIVE DATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Road and Was	raez LlC
Name of Life	nited Liability Company
The enclosed Articles of Organization and fee(s) ar	re submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
John R	lood
	Name of Person
	Jaga e CCC Birm/Company
	Birm/Company
3035 W Ho	ouston River Rd
	Address
Sulphus	La 70663
Jread 0318	City/State and Zip Code Code Grand Code d for future annual report notification)
E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, plea	ase call:
John Road at	337, 515 68 32
Name of Person	Area Code Daytime Telephone Number
	Sayama reispinata rambara in
Enclosed is a check for the following amount:	(* 1. d.)
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	Securified Copy (additional copy is enclosed) Securified Copy (additional copy is enclosed) Securified Copy Certified Copy Certified Copy
	(additional copy is enclosed)
Mailing Address Registration Section	Street/Courier Address Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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:	
•	
Rold and Wagner LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
3035 W Honston River Rd 3035 W Houston River 1 Enletur La 70663 Sulphur La 70663	PD
Inlphur La 70663 Sulphur La 70663	
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: Catvick Wasa = Name	
Lako Mary FL 32746 City Zip	
City	
Having been named as registered agent and to accept service of process for the above stated limited liability compathe place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in the capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performation of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 605, F.S Registered Agent's Signature (REQUIRED)	iis ince
(CONTINUED)	
Page 1 of 2	7 = 1
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(Use attachment if necessary) EV: Effective date, if other than the date of filing: 2 -1 - 15 (OPTIONAL) cettive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) EVI: Other provisions, if any.	Use attachment if necessary) V: Effective date, if other than the date of filing: VI: Other provisions, if any. REQUIRED SIGNATURES A positive an affirmation under the penalties of perjury that the facts stated herein are true. I am ware 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 adme of signee Filing Fees: \$ 30.00 Certified Copy (Optional) \$ 5.00 Certified Copy (Optional)	Title: "AMBR" = Authorized Member	Name and Address:
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