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(Re	equestor's Name)	····
(Ac	dress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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TALLAHASSEE FLORIDA

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COVER LETTER

то:	Registration Division of C	i Section Corporations			
SUBJI	ECT: <u>Roch X</u>	Yaxa, LLC. Name of I	Limited Liability Company		
The en	closed Articles	of Organization and fee(s)	are submitted for filing.		
Please	return all corre	spondence concerning this	matter to the following:		
	Ronnie I	1. Liu	Name of Person		
			Name of Person		
			Firm/Company		
	<u>5278 Tro</u>	oy Ave.	Address		
			Aduress		
	Freemor	nt. CA 94536	City/State and Zip Code		
_R	onn888@yah	oo.com E-mail address: (to be u	sed for future annual report notific	ation)	
For fur	ther informatio	on concerning this matter, p	lease call:		20
Ronni	ie H. Liu		(510) 270-2705		2015 HAY]
	Nar	me of Person	Area Code Daytime Te	lephone Number	
Enclos	ed is a check fo	or the following amount:		الله المال	2 M
□ \$125.0	00 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Starus &	₽ ₽
		iling Address distration Section	Street/Courier Add	ress	
	Keg	distration Section	Registration Section		

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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:	
Roch Xaxa, LLC.	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	e ca i i i i i i i i i i i i i i i i i i
The mailing address and street address of the principal of	rice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
540 E. Horatio Ave	540 E. Horatio Aave.
Suite 100	Suite 100
Maitland, FI 32751	Maitland, Fl. 32751
The Limited Liability Company cannot serve as its own Fanother business entity with an active Florida registration The name and the Florida street address of the registered a	1.)
Charles T. Douglas, Jr.	
Name	97 (4) 1
601 St. Johns Ave.	
Florida street address (P.O. Box	NOT acceptable)
`	— Say
Palatka, FI	FL 32177
City	Zip
the place designated in this certificate. I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the oblic Chapte. Registered Agent's Signal	
(CONTINUI	لالم)

Page 1 of 2

E V: Effective date, if other than the date of filing:	AMBR Ronnie H. Liu 5278 Troy Ave. Fremont, CA 94536 Charlene H. Liu 5278 Troy Ave. Fremont, CA 94536 Charlene H. Liu 5278 Troy Ave. Fremont, CA 94536 (Use attachment if necessary) E. V: Effective date, if other than the date of filing:	le: MBR" = Authorized Member GP" = Manager	Name and Address:
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.) Ronnie H. Liu Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	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 docume 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.)	•	Ponnie H. Liu
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ARTICLE IV-