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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Biggie Ros LLC Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    Janet Klinker   Name of Person		
Address  Pinellas Park, FL 33781  City/State and Zip Code  biggierosegmail. com  E-mail address: (to be used for future annual report notification)	16 00T 24 FY	SECS WEYER
For further information concerning this matter, please call:    Janet Klinker at (727) 953 - 2056   Name of Person Area Code Daytime Telephone Number	26	STATE AGBA
Enclosed is a check for the following amount:  \$\sigma \text{\$125.00 Filing Fee} \text{\$\sigma \text{\$130.00 Filing Fee & Certificate of Status}} \$\sigma \text{\$\sigma \text{\$\cong	ed)	
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

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:
7780 49th St. North	7780 49th St. North
Ste 178	5te 128
Pinellas Park, FL 33781	Pinellas Perk FL3318/
,	<i>'</i>

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:

Janet Klinker

Name

7780 49th St. North, Ste 178

Florida street address (P.O. Box NOT acceptable)

Pinellus Park FL 33781

City State Zip

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 partition as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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<u>Title:</u> "AMBR" = Authorized Mer	Name and Address:	
"MGR" = Manager _AMB R	Janet Klinker 7780 494 St. North, Ste 178 Pinellas Park 51 22781	
AMBR	Stephanie Snelson 7786 49th St. North, Ste 178 Pinellas Park, FL 33781	
(Use attachment if necessary		
(If an effective date is listed, the date the date of filing.)		
REOUIRED SIGNATURE		
This docum I am aware t	thre of a member or an authorized representative of a member.  In this executed in accordance with section 605.0203 (1) (b), Florida Statutes. In the section submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.	_
\$125.00 Filing Fee for Ar \$ 30.00 Certified Copy (6 \$ 5.00 Certificate of Sta	tus (Optional)	
	Page 2 of 2	<u> </u>

**ARTICLE IV-**The name and address of each person authorized to manage and control the Limited Liability Company: