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WINDER STREET

COVER LETTER ..

	ew Filing Section ivision of Corporations			
SUBJECT	Rags -1- LLC			
SUBJECT		imited Liability	Company	
The enclose	ed Articles of Organization and fee(s)	are submitted for	filing.	
Please retu	rn all correspondence concerning this r	natter to the follo	wing:	
	Joseph Rogalis			
		Name of Pe	rson	
	Rags - 1 - LLC			
		Firm/Comp	pany	
	30132 Tavares Ridge Blvd			
		Address		-
,	Tavares FL 32778			
		City/State and Z	ip Code	
j -	oerogalis@gmail.com			
	E-mail address: (to be use	ed for future annu	ial report notification	on)
For further in	formation concerning this matter, plea	se call: s		
Joseph Rogalis	81	3-390 - 8550		
	Name of Person	Area Code	Daytime Telephon	e Number
Enclosed is	a check for the following amount:			
\$125.00 Fil	ling Fee X \$130.00 Filing Fee & Certificate of Status	., \$155.00 l Certified (additional c		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		reet Address	
	New Filing Section Division of Corporations		w Filing Section vision of Corporati	ons
	P.O. Box 6327	Cli	fton Building	
	Tallahassee, FL 32314	26	61 Executive Cente	er Circle

Tallahassee, FL 32301

ARTÍCLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must con	tain the words "Limited	I Lightlity Company	#I I C " = #I I C "	
(widst con	tain the words. Limited	i Liability Company,	"L.L.C., OF "LLC.)	
ARTICLE II - Address: The mailing address and street a	ddress of the principal c	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
30132 Tavares Ridg	e Blyd	301	30132 Tayares Ridge Blvd	
Tavares FL 32778			Tavares FL 32778	
			<u> </u>	
another business entity with an a	Joseph Rogalis Joseph Rogalis 30132 Tavares Ridg Florida street addres Tavares	d agent are: Name se Blvd ss (P.O. Box NOT ac	cceptable)	18 MAY 29 PM 3: 29
	City	State	Zip	
	Οιίţ			

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Member	Joseph Rogalis Tavares FL 32778
 	7.5. 8
	29 SSE
	PH 3: 25
(Use attachment if necessary)	
If an effective date is listed, the date must be specific ne date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of S	(OPTIONAL) ic and cannot be more than five business days prior to or 90 days after t the applicable statutory filing requirements, this date will not be listed a state's records.
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	was Dadu
This document is executed I am aware that any false in	in accordance with section 605,0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.
J <u>oseph Rogalis</u>	Typed or printed 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 (C)

\$ 5.00 Certificate of Status (Optional)