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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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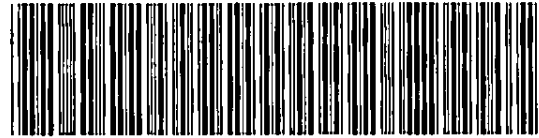
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE OF ARIZONA  
CORPORATIONS

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AUG 20 2018

*Agnieszka Piasecka, Esq.*  
**Agnieszka Piasecka Law, PLLC**  
P.O. Box 10292  
Largo, FL 33773  
Office: (727)-538-4171  
Cell: (813)-786-3911  
Email: [agafloridalaw@gmail.com](mailto:agafloridalaw@gmail.com)

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August 17, 2018


Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

Please find attached Articles of Organization for Florida Limited Liability Company with enclosed check for \$ 125.00.

If you have any questions, please do not hesitate to call me at 727-538-4171 or 813-786-3911 or email me at [agafloridalaw@gmail.com](mailto:agafloridalaw@gmail.com).

Sincerely,

  
Agnieszka Piasecka, Esq.

18 AUG 20 AM 9A 51  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Rogalio, 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:

Jacek Kazimierz Rogalski  
Name of Person  
Rogalio, LLC  
Firm/Company  
801 S Federal Hwy., Apt 1109  
Address  
Pompano Beach, FL 33062  
City/State and Zip Code  
jacekrogalski@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacek Kazimierz Rogalski 630 538-9031  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee  
☐ \$130.00 Filing Fee & Certificate of Status  
☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Jacek Kazimierz Rogalski

801 S Federal Hwy., Apt 1109

Pompano Beach, FL 33062

AMBR

Joanna Monika Walowska

801 S Federal Hwy., Apt 1109

Pompano Beach, FL 33062

(Use attachment if necessary)

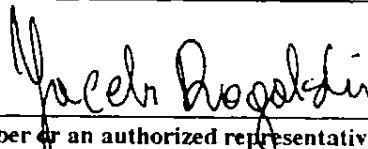
**ARTICLE V:** Effective date, if other than the date of filing: September 1, 2018 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Jacek Kazimierz Rogalski

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 (Optional)

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STATE OF FLORIDA  
DEPARTMENT OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rogalio, L.L.C.

(Must contain 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:

801 S Federal Hwy., Apt 1109  
Pompano Beach, FL 33062

Mailing Address:

801 S Federal Hwy., Apt 1109  
Pompano Beach, FL 33062

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:

Jacek Kazimierz Rogalski

Name

801 S Federal Hwy., Apt 1109

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

Pompano Beach

FL

33062

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



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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