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	Fax Number	: (850)617-6381	·-~	Ġ	E
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From:			¹	Ξ x	•
	Account Name	: LAZARUS CORPORATE FILING S	SERVICE, INC.	ö	
	Account Number	 T20000000019 		<u></u>	-
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	Phone	: (305)552-5973	<u> </u>	σ	
	Fax Number	: (305)675-5944	•		

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

FLORIDA LIMITED LIABILITY CO. RICHARD ROOF TILE SERVICE LLC

Certificate of Status	1	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$130.00	

2019

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Effective date 1 12020 ARTICLE J - Name:

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company,

Richard Troop Tile Service 1/c

ARTICLE II - Address:

The mailing address and street address of the principal office of the Lin ited Liability Company is: S.W 145 AVP

EL - 33177

ARTICLE III - Registered Agent, Registered Office:

R The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or ano her business entry with an active Florida registration.) σ



ARTICLE IV-

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



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Required Signatures:

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.().

<u>Sose P Durote LO</u> Typed or printed name of signee

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 mythries, 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)