L21000164185

	(Requ	estor's Nam	e)		
	(Addri	ess)			
	(Addn	ess)			
	(City/S	State/Zip/Pho	ne #)		
PICK-JA	>	MAIT		MAIL	
	(Busir	ness Entity Ñ	ame)		
	(Docu	iment Numbe	er)		
Certified Copies	- 	Certificat	tes of S	Status	
Special Instructions	to Fil	ling Officer			
					i

Office Use Only



800364281028

RECEIVED

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE <u>4/15/2021</u>			**WALK IN**
ENTITY NAME_Rol	and LLC		
DOCUMENT NUMBI	ER		
	PLEASE FILE	E THE ATTACHED AND RETURN	· pany
	Plain Copy		
XXY	Certified Copy		1. 30 to 15 to 15.
	Certificate of State	28	
	PLEASE OBTAIN TI	HE FOLLOWING FOR THE ABOVE ENTITY	· · · · · · · · · · · · · · · · · · · ·
	Certified Coop of t	Arts & Amendments	•
		Arts & Amendments Complete File (Including Annua	l Reports)
	Certificate of State	·	, ,
	• •	as Reflecting:	
	APOSTILLE	'/NOTARIAL CERTIFICATION	
COUNTRY OF DESTIN	VATION		·
NUMBER OF CERTIFI	CATES REQUESTED		·····
TOTAL OWED \$ /	55.00	ACCOUNT # 120140000108 United Corporate Services, Inc. For any issues or concerns. Thank you	leith flygad
Please call Tina at	the above number fo	for any issues or concerns. Thank you	a so much!



PECHIVED

2021 APR 20 PM 1: 11

SECRETARY OF STATE TALL AHASSED FLORE

April 19, 2021

SUNSHINE STATE

CORRECTED
Please Allow For
Same File Date

SUBJECT: ROLAND LLC Ref. Number: W21000052575

We have received your document for ROLAND LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

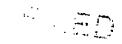
Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 421A00007967



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 APR 16 4K 8: 49

A	D'T	$\Gamma \cap \Gamma$	T.	ĭ.	No.	me:

The name of the Limited Liability Company is:

, , ,	and the state of t
1814 Roland LLC	•
(Must contain the words "Limited Liabi	ility 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:
1814 Roland Street	1814 Roland Street
Sarasota, FL 34231	Sarasota, Ft. 34231

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:

United Corporate Services, Inc.		
Name		
ve		
ss (P.O. Box <u>NOT</u>	acceptable)	
FL	32312	
State	Zip	
	Name ve ss (P.O. Box <u>NOT</u> FL	

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..

Michael A. Barr

Registered Agent's Signature (REQUIRED)

Michael A. Barr, President

(CONTINUED)

ARTICLE IV-

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

Title:	·	Name and Address:
	Authorized Member	
"MGR" = N	(anager	(a) to
AMBR	Timothy	J. Geiger
<u> </u>	1814 R	Sland Street
	Sarasot	Aland Street a, FL 34231
		सर्वे ह
		; · · ·
		an 1
		<u>ကို ကို</u>
-		
		1
 ,		
If an effective date is	we date, if other than the date of filing: _ listed, the date must be specific and o	. (OPTIONAL) sannot be more than five business days prior to or 90 days after
	rted in this block does not meet the appive date on the Department of State's r	plicable statutory filing requirements, this date will not be listed as
RTICLE VI: Other	•	evolus.
REQUIRE	SIGNATURE:	
	Trung	A
		authorized representative of a member.
	This document is executed in accor	dance with section 605.0203 (1) (b), Florida Statutes.
	I am aware that any false information	in submitted in a document to the Department of State
	constitutes a third degree felony as	provided for in s.817.155, F.S.
	Brian N Lewandowski Authorized F	
	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)