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(Re	equestor's Name)	
(1.0	Adoptor & Marrio	
	(depen)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	f)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Name	2)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Consist Instructions to	Cilian Officer	
Special Instructions to	Filing Onicer,	
-		

Office Use Only



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D O'KEEFE
JUN 0 9 2021

COVER LETTER

	ew Filing Sectivision of Con					
SUBJECT	Romipare	Services				
SUBJECT	•	N	ame of Lim	nited Liabil	ity Company	
The enclos	ed Articles of	Organization an	d fee(s) are	e submitted	for filing.	
Please retu	ırn all correspo	ondence concern	ing this ma	itter to the	following:	
	Roy T Rodr	guez				
				Name of	Person	
	Romipare S	ervices				
				Firm/Co	mpany	
	1423 Stenev	vahee Ave				
				Addr	ress	
	Sebring, FL	33870				
		_	С	ity/State an	d Zip Code	
	 	99@gmail.com		2 2		
		E-mail address: (to be used	for future a	annual report notificat	ion)
For further i	nformation co	ncerning this ma	itter, please	e call:		
	Roy T Rodri	guez	86 at (53	201-3612	
	Nam	e of Person		rea Code	Daytime Telephor	ne Number
Enclosed i	s a check for t	he following am	ount:			
□\$125.00	Filing Fee	■\$130.00 Fil Certificate of		Certifi	5.00 Filing Fee & ied Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailie	na Addaean			Street Address	

Mailing Address

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

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:				
Romipare Services LL		Lightlity Compar	ny, "L.L.C.," or "LLC.")		
(Must contai	n the words "Limited	Liability Compar	iy, II.C., or LLC.)		
ARTICLE II - Address: The mailing address and street add	lress of the principal o	office of the Limit	ted Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address:		
1423 Stenewahee Ave		1-	1423 Stenewahee Ave		
Sebring, FL 33870		S	ebring, FL 33870		
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an ac	annot serve as its own	Registered Ager	gent's Signature: nt. You must designate an individual or		
The name and the Florida street ac	ldress of the registered	d agent are:			
	Roy T Rodriguez				
Name					
	1423 Stenewahee Ave				
	Florida street address (P.O. Box NOT acceptable)				
	Sebring	FL	33870		
	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 & Signature (REOUIRED)

(CONTINUED)

21 HAY 20 PM 12: 43
SECRETARY OF STATE

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
Manager/Member	Roy T Rodriguez
	A SEC
	20 SSEI
	0RID)
	<u></u>
(Use attachment if necessary)	
TICLE V: Effective date, if other than the	e date of filing: May 17, 2021 (OPTIONAL)
an effective date is listed, the date must date of filing.)	be specific and cannot be more than five business days prior to or 90 days after
te: If the date inserted in this block does document's effective date on the Depart	not meet the applicable statutory filing requirements, this date will not be listed a
TICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Rost	docion.
Signature of	f a member or an authorized representative of a member.
I am aware that an	executed in accordance with section 605.0203 (1) (b), Florida Statutes. y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
Roy T Rod	
<u> </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 (Optional)