

L21000335358

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000280506 3)))



H210002805063ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160C00017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

****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.
RMGASE LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

21 JUL 22 PM 12:43

FILED

**ARTICLES OF ORGANIZATION
OF
RMGASE LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is: **RMGASE LLC**

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

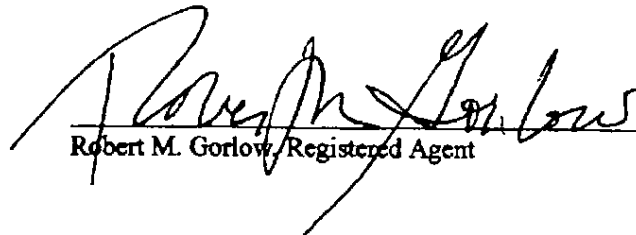
**7485 Fairway Drive
Suite 430
Miami Lakes, Florida 33014**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

**Robert M. Gorlow
7485 Fairway Drive
Suite 430
Miami Lakes, Florida 33014**

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.


Robert M. Gorlow, Registered Agent

FILED
TALLAHASSEE, FLORIDA

21 JUL 22 PM 12:43

60

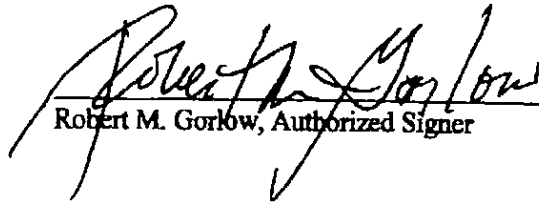
H21000280506

ARTICLE IV: - Management

The name and address of the individual authorized to manage and control the limited liability company is as follows:

<u>Title:</u>	<u>Name and Address:</u>
AMBR	Robert M. Gorlow 7485 Fairway Drive, Suite 430 Miami Lakes, Florida 33014

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on July 19, 2021.


Robert M. Gorlow, Authorized Signer

(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 Section 817.155, Florida Statutes.)

Robert M. Gorlow
Typed or printed name of signee

FILED
21 JUL 22 PM 12:43
TALLAHASSEE, FLORIDA