1-21000-422753

(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
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T. SCOTT



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COVER LETTER

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	New Filing Section Division of Corporations				
SUBJEC	R&G Bertolet Holdings LLC				
Name of Limited Liability Company					
The enclo	osed Articles of Organization and fee(s) are submitted	for filing.		
Please re	turn all correspondence concerning this	matter to the	following:		
	Roy D. Bertolet				
		Name of	Person		
		Firm/Co	impani'		
	129 Oak Lane	Time	mpany		
		Addr	ress		
	Ormond Beach, FL 32174				
	rbertolet@gmail.com	City/State an	d Zip Code		
	E-mail address: (to be us	sed for future a	innual report notificat	ion)	
For further	information concerning this matter, ple	ase call:			
	Roy Bertolet	386	214-6602		
	Name of Person	Area Code	Daytime Telephon	e Number	
Enclosed	is a check for the following amount:				
≣\$ 125.0	0 Filing Fee A\$130.00 Filing Fee Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address New Filing Section		Street Address New Filing Section Di	vision	
	Division of Corporations P.O. Box 6327		The Centre of Tallaha 2415 N. Monroe Stree	issee	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:		
R & G Bertolet Holdi		·	
(Must contai	n the words "Limited I	Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	dress of the principal o	ffice of the Li	mited Liability Company is:
<u>Principal</u>	Office Address:		Mailing Address:
129 Oak Lanc			129 Oak Lane
Ormond Beach, FL 3	2174		Ormond Beach, FL 32174
another business entity with an ac-	tive Florida registration	n.) agent are: Name	gent. You must designate an individual or OT acceptable)
	Ormond Beach	FL	32174
	City	State	Zip
lace designated in this certificate, I urther agree to comply with the prov	hereby accept the appo visions of all statutes re- gations of my position a	intment as reg lating to the p as registered a	for the above stated limited liability company at the gistered agent and agree to act in this capacity. I proper and complete performance of my duties, and legent as provided for in Chapter 605, F.S

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:				
"MGR" = Manager _AMBR	Roy D. Bertolet, Jr. 129 Oak Lane Ormond Beach, FL 32174				
AMBR	George D. Bertolet 530 Sand Ridge Rd. Conway, SC 29526				
AMBR	Janice E. Dean 5210 Abington Way Eric, PA 16506				
AMBR	Joanne E. Comb 305 Cherry Blossom Ct. Conway, SC 29523				
AMBR	Joyce E. Ginelli				
(Use attachment if necessary)	2740 Country Lane Langhorne, PA 19047				
the date of filing.)	cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed as				
This document is execute I am aware that any false	inter or an authorized representative of a member. and in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.				
Roy D. Bertolet	Typed or printed name of signee				
i yped or printed name of signee					

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

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)

. . . .

ARTICLE IV-