Division of Corporations

220001114089

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H22000102630 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FLORIDA ENTREPRENEUR LAW, P.A.

Account Number : I20190000063

Phone

Fax Number (954)882-4119 :

(954)400-5096

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

Email Address: Bobby@roydrywall.com

FLORIDA LIMITED LIABILITY CO. ROY DRYWALL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Fax: 19548000484

To:

COVER LETTER

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	ew Filing Sec vision of Cor					
SUBJECT	ROY DR	YWALL, LLC Name of Limit	ed Liabilit	у Сотрапу		
The enclose	ed Articles of	Organization and fee(s) are :	submitted 1	for filing.		
Please retur	n all correspo	ondence concerning this matt	er to the fe	ollowing:		
	Michel	lle K. Suarez, Esq.				
			Name of I	Person		
	Florida	Entrepreneur Law, P.A.				
			Firm/Con	npany		
	101 NE :	3rd Ave., Suite 1500				2022 HAR 18
			Addre	SS		HAR
	Fort Lau	iderdale, FL 33301				HAR 18 PM K
		Cit	y/State and	Zip Code		
_		groydrywall.com				PH K: O
	ŀ	E-mail address: (to be used for	or future ar	nnual report notificati	on)	71 T
For further in	formation co	ncerning this matter, please o	:all:			.₩,
	Michelle K	. Suarez, Esq. at (95	54	882-4119		
•	Nam	e of Person Are	a Code	Daytime Telephone	e Number	
Enclosed is	a check for the	he following amount:				
⊠ \$125.00	Filing Fee	□\$130.00 Filing Fee &		.00 Filing Fee &	□\$160.001	-

Mailing Address

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

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

Fax: (850) 617-6381

03/18/2022 4:10 PM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ((H220

ARTICLE I - Name:

The name of the Limited Liability Company is:

ROY DRYWALL, LLC

(Must contain the words "Limited Liability 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: 2131 Hollywood Boulevard #508 2131 Hollywood Boulevard #508 Hollywood, FL 33020 Hollywood, FL 33020

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:

Florida Entreprene	ur Law, P,A.	
	Name	
101 NE 3rd Ave., S	uite 1500	
Florida street addres	s (P.O. Box <u>NOT</u>	acceptable)
Fort Lauderdale	FL_	33301
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's Signature (REQUIRED)

Michelle K. Suarez, signing on behalf of Florida Entrepreneur Law, P.A.

(CONTINUED)

From: Michellé Suarez Fax: 19548000484 To: Fax: (850) 617-6381 Page: 5 of 5 03/18/2022 4:10 PM

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Title; "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR/AMBR	Bobby Roy 26 Rideau Crossing Crescent
	Kemptville, Ontario Canada K0G 1J0
_AMBR	BR Drywall, Inc.
MIDK	26 Rideau Crossing Crescent
	Kemptville, Ontario Canada KOG 1J0
(Use attachment if necessary) EV: Effective date, if other than the fective date is listed, the date must	ne date of filing: <u>Date of filing</u> (OPTIONAL)
EV: Effective date, if other than the fective date is listed, the date must of filing.)	ed by Bobby Roy.
LE V: Effective date, if other than the fective date is listed, the date must of filing.) If the date inserted in this block does ment's effective date on the Depart. LE VI: Other provisions, if any.	s not meet the applicable statutory filing requirements, this date will not be in timent of State's records.
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