Fiorida 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.

(((H22000194267 3)))



H220001942673ABC0

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 : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112 Phone : (302)575-0875 Fax Number : (302)575-1642

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

Email	Address:			
	_	 	 	

FLORIDA LIMITED LIABILITY CO. THE 19TH ROLL, LLC

Certificate of Status	0		
Certified Copy	0		
Page Count	02		
Estimated Charge	\$125.00		

Electronic Filing Menu

Corporate Filing Menu

Help



422001942673

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

THE 19TH ROLL, LLC

(Must end with 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:

913 13TH AVE NW

LARGO FL 33770

Mailing Address:

913 #3th AVE NW LARGO FL 33770

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:

AGENTS AND CORPORATIONS, INC.

539 FIFTH AVENUE SOUTH SUITE 330 Florida street address (P.O. Box NOT acceptable)

NAPLES

FL

34102

City

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..

Agents and Corporations, Inc.

Registered Agent's Signature (Required)

John L. Williams, President

(CONTINUED)

Page 1 of 2

ARTICLE IV-

"MGR" = Manager

MGR

AMBR

the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

"AMBR" = Authorized Member

Stephen ELLES 913 13TH AVE NW LARGO FL 33770 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after

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

STEPHEN ELLES

Name and Address:

913 13TH AVE NW

LARGO FL 33770

Signature of a member or an authorized representative of a member. (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 s.817.155, F.S.)

Filing Fees:

TEPHEN J ELLES HER AMBR

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2