

8/9/22, 11:29 AM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**L22000348666**

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((H22000269090 3)))



H220002690903ABC/

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To:

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

From:

Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : 120180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

**\*\*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.  
ROCCO'S DELIVERY, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

2022 AUG -9 PM 3:20

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SECRETARY OF STATE  
FALLAHASSEE, FL 32411

22 AUG -9 AM 4:40

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

ROCCO'S DELIVERY, LLC

ARTICLE II - ADDRESS OF LIMITED LIABILITY COMPANY

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THE  
LIMITED LIABILITY COMPANY IS:

4369 COMMERCIAL WAY  
SPRING HILL, FLORIDA 34606


ARTICLE III - REGISTERED AGENT AND OFFICE

THE NAME OF THE REGISTERED AGENT AND THE STREET ADDRESS OF  
THE REGISTERED OFFICE OF THE LIMITED LIABILITY COMPANY IS:

SABEN REITER  
4369 COMMERCIAL WAY  
SPRING HILL, FLORIDA 34606

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, FLORIDA STATUTES.

DATED: 7/20/2022

X   
SABEN REITER

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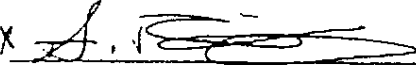
((H22000269090 3)))

ARTICLE IV - MANAGEMENT

THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS  
AS FOLLOWS:

MANAGER/MEMBER: SABEN REITER  
4369 COMMERCIAL WAY  
SPRING HILL, FLORIDA 34606

DATED: 7/27/2022

X   
SABEN REITER

IN ACCORDANCE WITH SECTION 605.0203(1)(b), FLORIDA STATUTES, THE  
EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER  
PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

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TALLAHASSEE, FLORIDA

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ROCCO'S DELIVERY, LLC  
4369 COMMERCIAL WAY  
SPRING HILL, FL 34606

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DATE: 8/3/2022

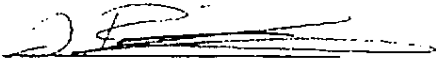
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: ROCCO'S DELIVERY, LLC - L22000336011

To whom it may concern:

Please be informed that ROCCO'S DELIVERY, LLC - L22000336011 has no intention of revoking the dissolution. We are releasing the name for use to another entity.

Cordially,

X 

SABEN REITER, Member  
ROCCO'S DELIVERY, LLC

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SECRETARY OF STATE  
TALLAHASSEE, FL 32304

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