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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : FL PATEL LAW PLLC  
Account Number : I20170000097  
Phone : (727)279-5037  
Fax Number : (727)888-1294

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**FLORIDA LIMITED LIABILITY CO.  
BD Machine LLC**

Certificate of Status	1
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**COVER LETTER**

February 18, 2019

To: New Filing Section  
Division of Corporation

Subject: BD Machine LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and Fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

**Kalpesh J. Patel, Esq.**  
**FL Patel Law PLLC**  
360 Central Avenue  
8<sup>th</sup> Floor  
St. Petersburg, Florida 33701  
Fax: 727-888-1294

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**For further information concerning this matter, please call or e-mail:**

**Kalpesh Patel at 727-279-5037 or e-mail at contact@flpatellaw.com**

**Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status**

**FL Patel Law PLLC**

**Articles Of Organization**

**For**

**BD Machine LLC**

**A**

**Florida Limited Liability Company**

**ARTICLE I**

**Name**

The name of the Limited Liability Company is: BD Machine LLC (the Company).

**ARTICLE II**

**Address**

The mailing address and street address of the principal office of the Company is 12550 71st Court #200, Largo, Florida 33773.

**ARTICLE III**

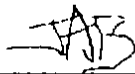
**Registered Agent, Registered office, & Registered Agent's Signature:**

The name and the Florida Street Address of the Registered Agent are:

Justin A. Baklund  
12550 71st Court #200  
Largo, Florida 33773

FILED  
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STATE OF FLORIDA  
CLERK OF COURT

*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..*



(sign)

**(CONTINUED)**


**ARTICLE IV:**

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
<b>AMBR = Authorized Member</b> <b>MGR = Manager</b>	
<u>AMBR</u>	<u>Justin A. Baklund</u> 12550 71st Court #200 Largo, Florida 33773
<u>AMBR</u>	<u>Matthew John Doom</u> 12550 71st Court #200 Largo, Florida 33773

**ARTICLE IV:**

The Effective date shall be the date of filing.

  
 \_\_\_\_\_ (sign)

**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Justin A. Baklund  
 \_\_\_\_\_  
 Authorized Representative/Member

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