

L01000002041

January 23, 2001

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-01/25/01--01081--010
****125.00 ****125.00

To Whom It May Concern:

Please find attached the Articles of Organization for registering a LLC. I am enclosing a check for \$ 125.00 to cover the filling fee, designation of agent and certificate of status.

Name: Wi Benjamin
Address: 16057 E. Yorkshire Dr
Loxahatchee, FL 33470
Day Phone: (561) 753-8388

FILED
01 FEB - 8 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L01-2041
QR



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 30, 2001

WI BENJAMIN
16057 E. YORKSHIRE DRIVE
LOXAHATCHEE, FL 33470

SUBJECT: BLUE PHOENIX GROUP, LLC
Ref. Number: W01000002195

We have received your document for BLUE PHOENIX GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 401A00005489

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 FEB - 8 AM 11:34

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Blue Phoenix Group, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

16701 W Mead Hill
Loxahatchee, FL 33470

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

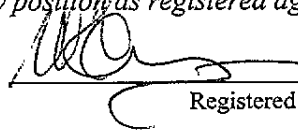
WI Benjamin

The name and the Florida street address of the registered agent are:

WI Benjamin
Name
16057 E Yorkshire Dr
Florida street address (P.O. Box NOT acceptable)
Loxahatchee FL 33470
City, State, and Zip

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above state 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 608, F.S..



Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

W. I. Benjamin

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)