

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

L0200000000189

Bobbies Buys, LLC

4000004740984--0  
-01/03/02--01006--021  
\*\*\*\*125.00 \*\*\*\*125.00

_____	Art of Inc. File	_____
_____	LTD Partnership File	_____
_____	Foreign Corp. File	_____
✓ _____	L.C. File	_____
_____	Fictitious Name File	_____
_____	Trade/Service Mark	_____
_____	Merger File	_____
_____	Art. of Amend. File	_____
_____	RA Resignation	_____
_____	Dissolution / Withdrawal	_____
_____	Annual Report / Reinstatement	_____
_____	Cert. Copy	_____
✓ _____	Photo Copy	_____
_____	Certificate of Good Standing	_____
_____	Certificate of Status	_____
_____	Certificate of Fictitious Name	_____
_____	Corp Record Search	_____
_____	Officer Search	_____
_____	Fictitious Search	_____
_____	Fictitious Owner Search	_____
_____	Vehicle Search	_____
_____	Driving Record	_____
_____	UCC 1 or 3 File	_____
_____	UCC 11 Search	_____
_____	UCC 11 Retrieval	_____
_____	Courier	_____

APPROVED  
AND  
FILED

02 JAN -3 PM 12:49

RECEIVED

02 JAN -3 PM 11:45

DIVISION OF CORPORATION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1-3-02

Signature

Requested by:

Name SK Date 1/3/02 Time 9:10

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

**ARTICLES OF ORGANIZATION**

**OF**

**BOBBIES BUNS, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I - NAME:**

The name of the limited liability company shall be:

**BOBBIES BUNS, LLC ("company")**

**ARTICLE II - ADDRESS:**

The mailing address and street address of the principal office of the company shall be:

39 South Beneva Road  
Sarasota, FL 34232

**ARTICLE III - REGISTERED OFFICE AND AGENT**

The name and street address of the registered agent of the company in the State of Florida is:

Bobbie Blaise  
39 South Beneva Road  
Sarasota, FL 34232

*Having been named as the 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 608, F.S.*



Bobbie Blaise  
Registered Agent

02 JAN - 3 PM 12:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVE  
AND  
FILED

**ARTICLE IV – MANAGEMENT (Check box if applicable.)**

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

Bobbie Blaise

**BOBBIE BLAISE**  
Signature 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.)

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization in Sarasota, Florida, on this 26<sup>th</sup> day of December, 2001.

Bobbie Blaise

Bobbie Blaise  
Member

STATE OF FLORIDA  
COUNTY OF SARASOTA

Sworn to and subscribed before me this 26<sup>th</sup> day of December, 2001, by Bobbie Blaise.

Janith P. Sheffield  
Notary Public – State of Florida  
(Seal)



Janith P. Sheffield  
MY COMMISSION # CC813740 EXPIRES  
March 1, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

Personally Known ☒  
Identification Produced ☐

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 JAN -3 PM 12:49

APPROVED  
AND  
FILED